

AUTHORIZATION FOR RELEASE OF RECORDS AND DOCUMENTS

Child's Legal Name: _____

Child's Date of Birth: _____

To Whom It May Concern:

I do hereby authorize and direct the Dawson County School System to release to the Juvenile Court of Dawson County, upon request by probation officer or court service worker, any and all academic records, behavior records, special education and student support team records, and any other records related to the above-named child that are in the possession of the School System. I further authorize any school administrator, teacher or other employee of the School System having information concerning my child, and having signed a confidentiality agreement, to disclose and discuss such information involving my child's attendance, behavior, academic performance, services, and any other information regarding the above child.

I further authorize the Juvenile Court of Dawson County and any of its employees to share with the Dawson County School System and its employees who have signed a confidentiality agreement, information concerning my child's status with the Court and to work cooperatively among themselves in a manner the Court and the School System deem appropriate for the best interests of my child.

By signing the release, I am waiving any right to privacy as to school and court records that I or my child may have under federal or state law. I understand this release shall remain in effect for as long as my child is a student within the Dawson County School System and is subject to the jurisdiction of the Dawson County Juvenile Court unless specifically revoked in writing by me.

I also hereby acknowledge that pursuant to O.C.G.A. Section 15-11-710, the Dawson County Juvenile Court and the Dawson County School System have the right to exchange information regarding the above-named child as necessary to further the best interests of said child.

Sworn and subscribed before me

This ____ day of _____, 20____.

Parent/Legal Guardian (Print Name)

NOTARY PUBLIC

Parent/Legal Guardian Signature

My commission expires: _____