



## Authorization to Release/Obtain Information

Student \_\_\_\_\_ Responsible Party \_\_\_\_\_

I understand that during the course of instruction at Sylvan Learning Center, it may become necessary for Sylvan to consult with various persons, such as doctors, educators and other outside experts concerning my student. I expressly authorize and consent to Sylvan's consultation with such professionals and experts on my student's behalf. I understand that in the course of such consultation, Sylvan may receive or give information that is of a confidential nature.

I hereby authorize Sylvan to receive and give such information concerning my student that may be beneficial in the instruction of my student. I also authorize my student's physicians, educators and others who may possess confidential information concerning my student to divulge and deliver that information to Sylvan. A facsimile of this authorization should be sufficient to authorize the delivery of such information to Sylvan. Should I, at any time, wish to retain the confidential nature of any such information, I will advise you in writing.

\_\_\_\_\_  
Responsible Party Signature

\_\_\_\_\_  
Date

**OR**

I have read the above, but at this time, I wish to decline permission for Sylvan to obtain information or release information to any outside professional working with my student.

\_\_\_\_\_  
Responsible Party Signature

\_\_\_\_\_  
Date

School \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_  
Principal \_\_\_\_\_  
Counselor \_\_\_\_\_

Teacher(s)	Subject(s)	Contact Details <small>(e.g. email address, teacher's direct phone/fax, best time/method to reach, etc.)</small>

**SYLVAN USE ONLY**

Letter and questionnaire sent _____	Pgm:	SBR	SAR	SME	ALG	SSS	SOAR	SOME
Contact date(s) _____		ARS	SAT	ACT	SAW	SM	HS	
Report filed _____					Other _____			
Thank you sent on _____	Conference scheduled for _____							
Progress Manager _____	Conference completed on _____							

Keep assessment information confidential from \_\_\_\_\_