

**Print Name of Parent/Guardian** 



\*\*This consent will be shared with the Manchester School District.

## MANCHESTER SCHOOL DISTRICT SCHOOL ADMINISTRATIVE UNIT NO. 37

SCHOOL ADMINISTRATIVE UNIT NO. 37 20 Hecker Street Manchester, NH 03102

Telephone: 603.624.6300 • Fax: 603.624.6337

Jennifer Chmiel Superintendent of Schools **Diane Fitzpatrick**CEO-Boys & Girls Clubs of Greater Manchester

Signature of Parent/Guardian

## CONSENT FOR RELEASE OF STUDENT RECORDS

education records of		ropriate) hereby authorizes the release of the <b>ame of Student)</b> attending	
		ter School District to the Boys & Girls Clubs	
Greater Manchester.	, ,	·	
The specific records to be relea	sed are as follows:		
*Student Attendan			
	nic Report Card and records available to the	related grades and course assignments are Boys & Girls Clubs of Greater Manchester or	
Records designated should be released and disclosed only to the <b>Boys &amp; Girls Clubs of Greater Manchester</b> for the purpose of your child's participation in the Boys & Girls Clubs of Greater Manchester's <b>Academic Case Management Program</b> .			
of the Club; that I am entitled to review	the above education of District in writing;	n effect while my son/daughter remains a memba records; that I may revoke this consent at any and that any such revocation will take effect up isclosed in reliance upon this consent.	
data including but not limited to the Fed Any information that the we learns duri confidentiality maintained, will not be s third parties for any reason (including of	deral Educational Rig ing the course of prov shared with anyone ou disaggregated data) an oose for which it was o	aws in preserving the confidentiality of student ghts and Privacy Act (FERPA) and RSA 189:66 widing services to District students will be outside of the organization, will not be provided and will not be disclosed or used in any way other obtained. The Boys and Girls Club will comply data confidentiality, Students 151.	