



Palmetto Youth Academy

AUTHORIZATION TO RELEASE INFORMATION

I, hereby, give permission to Palmetto Youth Academy (PYA) to obtain and/or share information regarding _____ from previous school(s), or to otherwise further (Student Name) of this student in accordance with applicable and federal laws and regulations. This release form is valid as long as _____ is a student of PYA or until withdrawn by the parent/guardian. (student name) Should I have any questions concerning necessary services and/or programs, I may request a review of my child's school records. A copy of this consent has been provided to me.

Signature of Parent/Guardian

Relationship to Student

Witness

Date

WITHDRAWAL OF AUTHORIZATION TO RELEASE INFORMATION

I, hereby, withdraw my authorization of consent for my child.

(Student Name)

Signature of Parent/Guardian

Relationship to Student

Witness

Date