



RELEASE OF EDUCATION RECORDS

State Form 55228 (R2 / 8-14)
DEPARTMENT OF CHILD SERVICES

INSTRUCTIONS: *This form must be signed by a Department of Child Services (DCS) Representative. After it is signed, it should be sent, or taken, to the last school in which the child was enrolled. The form can be submitted to the school without the parent's / guardian's signature. The school will then forward the necessary information to the DCS representative. Receiving this information in a timely manner will speed up the process of enrolling the child in school and will assist us in determining the appropriate grade placement for the child.*

I hereby consent to the release of educational records to the Indiana Department of Child Services for the purpose of ensuring the safety and wellbeing of my child(ren). *	
Records that may be disclosed (<i>check all that apply</i>):	
<input type="checkbox"/> Cumulative file—Academic record, attendance record, transcript, ISTEP information, scholastic, health, standardized test results, and documentation of expulsion (<i>if applicable</i>).	
<input type="checkbox"/> Special Education record—Individualized Education Program (IEP) or 504 Plan, including psychological testing and evaluations.	
Individual(s) whose records may be disclosed: (<i>full name of each child</i>)	
Party or class of parties to whom the disclosure is made:	
Signature of DCS representative	Date (<i>month, day, year</i>)
Printed name of DCS representative	
Signature of parent / guardian (<i>optional</i>)	Date (<i>month, day, year</i>)
Printed name of parent / guardian (<i>optional</i>)	

* In compliance with the Federal law Family Educational Rights and Privacy Act (FERPA), 20 USC 1232g, 34 CFR Part 99.30 and Indiana State law Title 511 Article 7, Rule 38, Part 1, as amended by the Uninterrupted Scholars Act (PL 112-278). This consent can be revoked in writing at any time.