



# PATOKA

Community Unit School District #100

Patoka School Board Members  
Kurt Belcher: President  
Andy Goldsboro: Vice President  
Rick Burks: Secretary, Tanner Meier, Cassie Huffman,  
Mark Payne and Russell Adams

1220 Kinoka Road, Patoka IL 62875  
Phone: 618-432-5440 Fax: 618-432-5306  
Mr. Justin Venhaus, Superintendent  
Mr. Phil March, Principal  
www.patokaschool.com

## AUTHORIZATION FOR EXCHANGE OF CONFIDENTIAL INFORMATION

Student Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_

As the parent/legal guardian of the above child, I hereby grant my permission to Patoka Community Unit School District #100 to exchange confidential information concerning my child with: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Name of institution, doctor, etc.*

Purpose of this disclosure:

1. Educational evaluation and program planning.
2. Health assessment and planning for health care services and treatment at school.
3. Medical evaluation and treatment.
4. Other: \_\_\_\_\_

I understand that my permission covers the release of permanent and temporary records, as well as the release of confidential records and reports. I recognize that these records, once received by the school district, may not be protected by the HIPAA Privacy Rule, but will become education records protected by the Family Educational Rights and Privacy Act. I further understand that this release will expire one year from the date of my signature. I may cancel this authorization at anytime by submitting a written request to the school.

\_\_\_\_\_  
*Printed name of Parent/Legal Guardian*

*Relationship*

\_\_\_\_\_  
*Signature of Parent/Legal Guardian*

*Date*