

CTED Release of Information Form

## RELEASE OF INFORMATION

STUDENT: \_\_\_\_\_

DOB: \_\_\_\_\_

The undersigned parent(s) or legal guardian(s) of the above named student, hereby authorizes Yuma Union High School District to furnish any and all student records concerning my child, including special education records (IEP), grades, transcripts, attendance records, discipline files, etc, if requested, to:

**Southwest Technical Education District of Yuma #96**  
**291 S. Main Street, Suite L**  
**Yuma, Arizona 85364**  
**FAX 928.237.9232**

The undersigned parent(s) or legal guardian(s) of the above named student, hereby authorize STEDY #69 to furnish any and all student records concerning my child, as necessary for my child's enrollment in Southwest Technical Education District of Yuma.

DISCLOSURE OF THIS INFORMATION IS REGULATED BY AND SHALL BE IN COMPLIANCE WITH THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA); ARIZONA REVISED STATUTES SECTION 15-1043 AND OTHER APPLICABLE PRIVACY LAWS AND REGULATIONS.

\_\_\_\_\_

SIGNATURE PARENT/ GUARDIAN (please specify)

\_\_\_\_\_

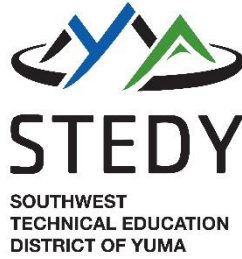
\_\_\_\_\_

\_\_\_\_\_

ADDRESS PARENT/GUARDIAN

\_\_\_\_\_

DATE



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DOB: \_\_\_\_\_

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**Yuma Union High School District**  
**3150 S. Ave. A**  
**Yuma, Arizona 85364**  
**FAX 928.237.9232**

The undersigned parent(s) or legal guardian(s) of the above named student, hereby authorize STEDY #69 to furnish any and all student records concerning my child, as necessary for my child's enrollment in Yuma Union High School District.

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\_\_\_\_\_  
SIGNATURE PARENT/ GUARDIAN (please specify)

\_\_\_\_\_  
DATE

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

ADDRESS PARENT/GUARDIAN