



## RELEASE OF INFORMATION

STUDENT NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

As a parent(s) or legal guardian(s) of the above named student, I/We authorize the following high school district/college/other educational institution: \_\_\_\_\_

To furnish any and all student records, concerning my child, including special education records (EIP), grades, transcripts, attendance records, discipline files, etc., if requested to:

STEDY  
Southwest Technical Education District of Yuma  
291 South Main Street  
Yuma, AZ 85364

I/We also authorize Southwest Technical Education District of Yuma to furnish any and all student records, concerning my child as indicated above, to the education institution identified above.

IT IS UNDERSTOOD THAT DISCLOSURE OF THIS INFORMATION IS REGULATED BY THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT (FERPA), A.R.S. 15-1043 AND OTHER LAWS AND REGULATION, AND WILL BE TREATED ACCORDINGLY.

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SIGNATURE PARENT/GUARDIAN (please specify)

DATE

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ADDRESS PARENT /GUARDIAN