**[Sample FERPA Consent Form]**

Disclosure of Information Protected by the Family Educational Rights and Privacy Act

by \_\_\_\_\_\_\_\_\_\_\_ [NAME OF SCHOOL/SCHOOL DISTRICT] to \_\_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF PERSON/ENTITY

RECEIVING PII]. Pursuant to the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34

C.F.R. part 99), the written consent of a parent or eligible student is required before the education

records of a student, or personally identifiable information contained therein, may be disclosed to

a third party, unless an exception to this general requirement of written consent applies. If a

student is age 18 years or older, or is enrolled in an institution of postsecondary education, he or

she is an “eligible student” and must provide written consent for the disclosure of his or her

education records or personally identifiable information contained therein.

I, \_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF PERSON SIGNING], hereby agree to allow \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[SCHOOL OR

DISTRICT NAME] to disclose the following personally identifiable information or education records:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [SPECIFY EDUCATION RECORDS OR PERSONALLY IDENTIFIABLE

INFORMATION THAT MAY BE DISCLOSED] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[NAME OF STUDENT] to

[NAME OF PERSON/ENTITY RECEIVING PII] for the purpose of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[STATE

PURPOSE OF DISCLOSURE]. I understand that I may withdraw this consent to share this information at

any time. A request to withdraw consent should be submitted in writing and signed.

I further understand that all information witnessed and/or shared in a virtual special education setting is confidential. Issues about my child should only be discussed with the service provider or others who have a specific knowledge or interest in my child.

Signature of Parent, Guardian, or Eligible Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_