



**O'NEILL PUBLIC SCHOOLS
 AUTHORIZATION FOR RELEASE OF INFORMATION
 PO BOX 230
 O'NEILL, NE 68763**

ADMINISTRATIVE OFFICE PO Box 230 410 EAST BENTON PHONE – 402-336-3775 FAX – 402-336-4890	HIGH SCHOOL 7-12 PO Box 230 540 EAST HYNES PHONE – 402-336-1544 GUID. OFFICE – 402-336-2667 FAX – 402-336-1105	ELEMENTARY SCHOOL K-6 PO Box 230 1400 NORTH 4 TH STREET PHONE – 402-336-1400 FAX – 402-336-2651
---	--	---

STUDENT NAME: _____ BIRTHDATE: _____

ADDRESS: _____

REQUESTING AGENCY: _____

PHONE #: _____ FAX #: _____ E-MAIL: _____

SENDING AGENCY: _____

PHONE #: _____ FAX # _____ E-MAIL: _____

THE INFORMATION TO BE RELEASED:

_____ VERBALLY _____ WRITTEN _____ TWO-WAY COMMUNICATION

_____ MEDICAL INFORMATION

_____ PSYCHOLOGICAL INFORMATION

_____ PSYCHIATRIC INFORMATION

_____ SCHOOL INFORMATION, INCLUDING TRANSCRIPTS, TEST RESULTS

_____ SOCIAL OR CASE HISTORY

_____ OTHER _____

INFORMATION TO BE USED FOR: _____

A PHOTOCOPY OF THIS SIGNED AUTHORIZATION SHALL BE AS VALID AS THE ORIGINAL.
 THIS RELEASE MAY BE REVOKED AT ANY TIME.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____