



## IU5 ELECT Program

Education Leading to Employment and Career Training  
Program Office: 252 Waterford Street, Edinboro, PA 16412  
Phone: (814) 734-8467 Fax: (814) 734-2306

### CONSENT FOR RELEASE OF INFORMATION

I give permission for my daughter / son to participate in the IU5 ELECT Program, a cost-free program for pregnant or parenting students in the counties of Clarion, Crawford, Erie (outside the city of Erie), Forest, Venango, and Warren.

STUDENT NAME: \_\_\_\_\_ SEX \_\_\_ BIRTHDATE \_\_\_\_\_ DUE DATE \_\_\_\_\_

CHILD/REN (if applicable): \_\_\_\_\_ SEX \_\_\_ BIRTHDATE \_\_\_\_\_ AGE \_\_\_\_\_

In compliance with the Family Education Rights and Privacy Act of 1974 (PL 93-380), Pennsylvania MH/MR Act of 1966, and MH Procedures Act of 1976, I **AUTHORIZE THE RELEASE OF INFORMATION** so the IU5 ELECT Program can share and receive relevant information to maximize services with various agencies applicable for my daughter / son. The purpose of information sharing will be to assist in the coordination of services with local programs, to help students and children stay healthy, to complete mandated reports for funders, to confirm receipt of benefits with agencies as necessary, to track pregnancy outcomes, and to help students plan for life after the receipt of their diploma or High School Equivalency. The most common types of information and agencies include, but are not limited to the following:

TYPES OF INFORMATION	TYPES OF AGENCIES/FUNDERS
<ul style="list-style-type: none"> <li>• Medical Information</li> <li>• School/Academic Information</li> <li>• Social History Information</li> <li>• Child Services Information</li> <li>• Student/Child Immunization Records</li> <li>• Insurance Information</li> <li>• Welfare/Benefits Information</li> <li>• Employment Information/Verification</li> <li>• Other Relevant Case Information</li> <li>• Verification of pregnancy</li> <li>• Social Security Number</li> <li>• Verification of Identification (photo/student ID)</li> </ul>	<ul style="list-style-type: none"> <li>• PA Departments of Human Services and Education <ul style="list-style-type: none"> <li>○ County Assistance Office</li> <li>○ Early Learning Resource Center (ELRC)</li> </ul> </li> <li>• PA and County Departments of Health</li> <li>• PA Centers for Schools and Communities</li> <li>• Adult Education Providers (GED)</li> <li>• Schools/Cyber Schools</li> <li>• Women, Infants, Children (WIC) Nutritional Services</li> <li>• Other Relevant Programs / Services</li> <li>• Physician, women’s center, pregnancy center</li> <li>• Employer</li> <li>• Children’s Services (CYS, OCY)</li> </ul>

**All information will remain in strict confidence unless reporting is mandated. No personal information will ever be released to the public (compiled statistics may be used for reporting, grant writing, and / or fundraising purposes).**

I understand that this consent can be revoked by written request to the address listed above, except to the extent that action had been taken relying upon this consent. The consent will remain in force for a reasonable time in order to carry out the purpose for which it is given. Please contact the IU5 ELECT Program with any questions.

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Student Name (print)

\_\_\_\_\_  
Signature of Student (over age 14)

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Parent / Guardian Name (print)

\_\_\_\_\_  
Signature of Parent / Guardian

*This program is funded through the obtainment of competitive grants.*