



2018-2019

Division Office  
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**ACCESS TO PUPIL INFORMATION:  
AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION**

Student's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

I give the Home Placement Program permission to release school-related information (e.g. academic records, attendance records, discipline reports, and health care interventions) to the receiving school, house parents, or agencies. This information is used for the educational programming of the student.

I also give permission for Home Placement staff to access my child's academic progress and attendance through the receiving school's online program such as Maplewood, Power School, Home Logic, Parent Connect, and Edsby.

**I understand that I must give approval in order for my child to be sponsored in the Home Placement Program.**

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

**STUDENTS 18 YEARS OR OLDER: RELEASE OF INFORMATION**

Students 18 or older or who will be turning 18 during the school year are expected to release information to their parents/guardians, house parents, and Home Placement Program. I understand that I must give my approval in order to be sponsored.

**I hereby give permission to the school and Home Placement Program to release information to my parents/guardians, house parents, or agencies.**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date