

**St. Vincent Catholic Schools – Authorization to Exchange
Information Regarding Title I Services**

Please complete this form for each student in grades K-6.

Dear Parent/Guardian:

St. Vincent Elementary School receives educational services from the Title 1 Program. Title 1 is a federally funded program designed to provide additional academic support in the areas of reading and language. Please sign and return the form so that the Title 1 teacher can continue to offer support.

Sincerely,

St. Vincent DePaul Catholic Elementary School

**AUTHORIZATION TO EXCHANGE INFORMATION
REGARDING TITLE I SERVICES**

Student Name: _____ Grade Level: _____

As parent(s)/legal guardians of the student identified above, I/we authorize that:

- The school may provide copies of student records to the Title 1 agency for the purpose of determining eligibility for services; and if eligible,
- The school may provide and the Title 1 teacher/agency may have access to my child’s record of school performance; and,
- The school and Title 1 teacher/agency may exchange other pertinent information required for planning or monitoring progress in school and the Title 1 program.

This authorization shall continue for the duration that my child is eligible for Title 1 services or until I/we notify the school that we withdraw this permission.

Signature of Parent(s) or Legal Guardian(s)

Date

Mailing Address/City/State/Zip Code