Release of

YOUNG PERSON'S INFORMATION

# I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the **parent / caregiver** of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_give permission for Good Samaritan College staff to access student information [eg. Academic reports, Diagnostic and Standardised testing information] from my child’s previous schools. I understand that this information is confidential and will be treated as such.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Parent / Caregiver]

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

