

**FORM I: PERMISSION OF PARENT OR LEGAL GUARDIAN FOR
THIRD PARTY ACCESS TO STUDENT'S EDUCATION RECORD**

I, _____ " the parent or legal guardian of _____, a
(Name) (Name)
student at _____, Gore Public Schools, request that the following part of the
(School) above

be made available to---,- _____ for the purpose of
(Name)

Date: _____, -- _____ Signature of Parent

Please send me a copy of the records released at the following address:

Name _____
Address _____
City, State, Zip _____

Please send me a copy of the records released at the following address:

Name _____
Address_---, _____
City, State, Zip _____

Enclosed is \$ _____ for reproduction and mailing.