

PERMISSION FOR RELEASE OF INFORMATION

DATE: _____

I, _____, parent/guardian of
_____, give permission to

Kathleen Becker to communicate with the following persons or agencies:

1) _____

2) _____

3) _____

This communication includes the exchange of information through:

- 1) phone consultation
- 2) written reports
- 3) meetings

parent/guardian signatures _____

DATE _____