Waynesboro Public Schools
HIPAA-Compliant Authorization for Exchange of Health and Education Information

Student Name: ____ **Date of Birth:** _______________

Waynesboro Public Schools has permission to exchange health and education information/records for the purpose listed below.

From Where: Individual/Agency from which information may be obtained:
Name: ____ Agency: ______________________________________
____ ______________________________________

To Whom: Waynesboro Public School employee to whom information may be given:
Name: ____ Title: ____
____ ____

Description:
The health information to be disclosed consists of:
____
____
____

The education information to be disclosed consists of:
____
____
____

Purpose: This information will be used for the following purpose:
___ Educational evaluation and program planning
___ Health assessment and planning for health care services and treatment in school
___ Medical evaluation and treatment
___ Other: ____

Authorization

This authorization is valid for one calendar year. It will expire on __________ [*insert date*]. I understand that I may revoke this authorization at any time by submitting written notice of the withdrawal of my consent. I recognize that health records, once received by the school district, may not be protected by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), but will become education records protected by the Family Education Rights and Privacy Act (FERPA). I also understand that if I refuse to sign, such refusal will not interfere with my child's ability to obtain health care.

Parent Signature: ____ Date: __________________

Student Signature*: ____ Date: __________________

*If a minor student is authorized to consent to health care without parental consent under federal or state law, only the student shall sign this authorization form.

Copies: ___ Parent or Student*
___ Physician or other health care provider releasing the protected health information
___ School official requesting/receiving the protected health information

(Exchange of info)