



TENNESSEE DEPARTMENT OF HUMAN SERVICES

PARENT/GUARDIAN AUTHORIZATION FOR THE TENNESSEE DEPARTMENT OF EDUCATION or LOCAL EDUCATION AGENCY TO RELEASE SCHOOL ATTENDANCE RECORDS

Person Giving Permission: \_\_\_\_\_  
(Please **print** your name here)

\_\_\_\_\_  
(Please **sign** your name here)

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

I am the parent/ guardian/legal custodian of the minor child/student:

\_\_\_\_\_  
(Place child/student's full name here)

My street address is: \_\_\_\_\_  
\_\_\_\_\_(City) \_\_\_\_\_(State) \_\_\_\_\_(Zip Code)

My home telephone number with area code is: ( ) \_\_\_\_\_

**What is to be released and to whom:** I give permission for my child's (same name as above) school attendance records to be sent to the Tennessee Department of Human Services (TDHS) by the Tennessee Department of Education and/or my child's current or former school.

**The reasons for the release are:** The records will help show that my child is going to school as required by the laws of this State in order to prove eligibility for public assistance benefits.

TDHS may ask for paper copies, faxed copies, computer or electronic copies of the records from the Tennessee Department of Education and/or my child's current or former school.

I understand that I may request that the Tennessee Department of Education and/or my child's current or former school send me a copy of the records sent to TDHS.

**This permission is good for twelve (12) months from the date that I sign this form.**

**I understand that I do not have to sign this form. All information about a minor child/student that TDHS gets is protected by the Family Educational Rights to Privacy Act and federal and state law or regulations. I understand that I may withdraw my permission at anytime by sending a written statement to TDHS at the address below to withdraw my permission. I understand TDHS may not be able to decide my case on time if I don't sign the form, or if I take back my permission. I understand TDHS may have to deny my case if it cannot get records showing that my child is going to school.**

Tennessee Department of Human Services County Office: \_\_\_\_\_

Address: \_\_\_\_\_

[This authorization to disclose was developed to comply with the Family Educational Rights and Privacy Act (FERPA) 20 United States Code Section (U.S.C.) 1232g(b)(2)(A) and 34 Code of Federal Regulations (C.F.R.) 99.30 and the school age child attendance provisions under the Social Security Act, Temporary Assistance to Needy Families (TANF) 42 U.S.C. §608(b)(2)(A)(ii) and 42 U.S.C. § 604(i) and Tennessee Code Annotated Section (T.C.A.) 71-3-154(h)(2)(B)(i); and the elementary and secondary school attendance provisions under T.C.A. § 49-6-3001(c)(1)]