SMEL | Stimulating Minds through Entrepreneurship and Leadership

Parent/Guardian Data Release Consent Form

I. Information being requested.

SMEL is requesting your permission to collect academic performance and enrollment data on your child. This information will be used for the purposes of establishing program outcomes and may be used in an aggregated format to help advocate for continued funding.

II. What information from your child's student records is SMEL requesting?

We are requesting your permission to allow/authorize SMEL to obtain personally identifiable information from your child's student records from NYC Department of Education (DOE). Simultaneously, you are authorizing the DOE to release personally identifiable information from your child's student records with SMEL. The following information we would like to collect consists of biographical and enrollment information (specifically consisting of your child's name, address, date of birth, student identification number, grade, school(s) attended and transfer, discharge, and graduation data about your child); data concerning your child's results on state and national exams, credits earned, grades, promotion and retention status, and fitness gram score); and data related to any disciplinary actions taken against your child (including number and type of suspensions). We are requesting to collect the information listed above about your child on a past, present and future (i.e., ongoing) basis.

III. How will your child's data remain confidential?

The only people authorized to view your child's information are the SMEL Director and/or executive management team and DOE staff who manage the data systems and prepare research reports and program analyses. A limited number of SMEL staff identified to receive personal information is screened, provided extensive training to follow strict guidelines on protecting the confidentiality of information that would personally identify you or your child. Personally identifiable information collected from student records will only be shared electronically between DOE and SMEL and will be secured and protected in the SMEL data base. We will not use your name or your child's name in any published report. While we request your consent, your responses to the requests below will not affect your child's participation in our programs.

Please check Yes or No to the following statement:

I understand why SMEL is asking my permission to access the information listed above from my child's student records, and I give permission to DOE to share that information with SMEL on an ongoing basis.

Yes, I authorize SMEL and DOE to share my child's information/student records.

_____ No, I do not authorize SMEL and DOE to share my child's information/student records.

Student/Applicant Name: _____

Parent/Guardian Name: (Please Print):

Parent/Guardian Signature:

Date: _____