LOUISIANA DEPARTMENT OF EDUCATION

LEA SUPERINTENDENTκ/ I I ! w¢9w [9 ! 59w ! ¦¢ I hwL½! ¢Lhb

Please complete, scan, and return via email

!Ǒű yoт ǎűl·űŜǎ űKl·űΣ ḫb2űKλy∃ λǎ űKλǎ {ŜǑűλ2y̆ ǎKl·ff LJNJ2Kλōλű l· ǎǑK22f ǎèǎűŜY ŜYLJf2èŜŜ ŜYLJf2èŜŘ l·ű űKŜ ǎǑK22f l·yŘ l· LJŜNJǎ2y̆ l·dzűK2NJλΐŜŘ ōè űKŜ ǎdzLJŜNJλyűŜyŘŜyű 2Ŧ űKŜ ǎǑK22f ǎèǎűŜY ŦNJ2Y Kl·Øλy∃ l·ǑǑŜǎǎ ű2 l· ǎűdzŘŜyű¼ǎ NJŜǑ2NJŘǎ l·ǎ Y l·è ōŜ yŜǑŜǎǎl·NJè ű2 LJŜNJŦ2NJY Kλǎ ŘdzűλŜǎφḫ ¢Kλǎ Ŧ2NJY LJŜNJYλűǎ [9 ! ǎ ű2 NJŜIJdzŜǎű űKŜ [2dzλǎλl·yl· 5ŜLJl·NJűYŜyű 2Ŧ 9ŘdzǑl·űλ2y̆ l·ǑǑŜǎǎ ǎűdzŘŜyű NJŜǑ2NJŘǎ ű2 l·ǎǎλǎű [9 ! ǎ λy̆ LJŜNJŦ2NJYλy∃ űKŜNJ ŘdzűλŜǎφ

I have requested that the Louisiana Department of Education (LDE) access student records for the purposes of:

☐ I agree that the Department will have access to the following LJŜNJǎ2yl·ffè λŘŜyűλŦλl·ōfŜ λyŦ2NJY l·űλ2y̆ ŜfŜYŜyűǎ:
[λǎű Řl·űl· ŜfŜYŜyűǎφ

For the following students:
List student name(s) and Louisiana Secure ID(s).

I CONSENT to the LDE accessing [ ] student data listed above for the purposes stated above.
<Enter site code & school name above>

____ψψ_
Signature of LEA Superintendentκ/ Kl·NJűŜNJ [Ŝl·ŘŜNJ

____ψψ
LEA Superintendentκ/ Kl·NJűŜNJ [Ŝl·ŘŜNJ (please print)

____ψψ
Date

Internal Use Only:

Date Received ______________________________

Date(s)/Time(s) of Access ______________________

____

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Complete Date ______________________________

Louisiana Believes