Release of Information Form



Catholic Schools Office Lismore provides support to schools and families to help ensure a quality education to all enrolled. This support may include but not limited to:

- Facilitating an external professional to provide written or verbal advice to the school regarding your child;
- Reviewing currently held information by the school about your child;
- Providing advice at Case Conferences or Personalised Planning meetings.

For the above to occur the permissions below are sought for:

Child's full name:	Date of birth:
PERMISSION ☐ I/we give permission for the release of information regarding my/our child to CSO personnel.	
☐ I/we give permission for the release of information regarding my/child to external professionals to inform their advice to the school and CSO about my/our child.	
☐ I/we give permission for the release of information regarding my/child from external professionals to inform their advice to the school and CSO about my/our child.	
☐ I/we understand that all information will be used only for the purpose of assisting the school with supporting my/our child within the school setting.	
☐ I/we acknowledge that the provision of any information will be stored securely and viewed/shared according to the schools/CSO privacy statement. This statement can be found on the school/CSO website.	
FAMILY DETAILS	
FAMILY DETAILS	
By signing below, I/we acknowledge that we have been provided with opportunities to review and agree to the collection, use and storage of personal information. I/we authorize the school/CSO to disclose personal information about my/our child as it relates to my/our child's education. I/we authorise external parties to disclose personal information as it relates to my/our child's education.	
Parent/Carer 1	Parent/Carer 2 (if applicable)
Full Name:	Full Name:
Relationship to Child:	Relationship to Child:
Signature:	Signature:
Date:	Date:

Please return completed forms to your school.