



FREDERICK CAMPUS
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*Frederick Campus
Established 1868*

*Columbia Campus
Established 1973*



SIGNED PERMISSION TO OBTAIN OR RELEASE INFORMATION

I, _____ the (Parent/Legal Guardian) of _____, give permission to the Maryland School for the Deaf, Student Support Services Department to: (check all that apply)

Obtain information regarding:

Name: _____ Date of Birth: _____

From: _____

Release information regarding:

Name: _____ Date of Birth: _____

To: _____

Parent/Guardian Signature

Date

Address: _____

Witness

Date

Information obtained or released may include (check all that apply):

- Psychological Reports and/or Evaluations
- Psychiatric Evaluations and/or Reports
- Behavior Assessments and/or Incident Reports
- Counseling and/or Art Therapy Progress Report

I understand that permission to obtain and/or release information may be terminated at any time.

Maryland School for the Deaf does not discriminate on the basis of race, color, sex, age, national origin, religion, or disability in matters affecting programs, activities, or employment practices