

**Consent to Release Data – Request from an Individual**

*An individual asks the school district to release private data to an outside entity or person. Because the district does not have statutory authority to release the data, it must get the individual’s written informed consent.*

**Explanation of Your Rights**

If you have a question about anything on this form or would like more explanation, please talk to the Director of Human Resources before you sign it.

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I, \_\_\_\_\_, give my permission for Waconia Public Schools to release  
(name of individual)

data about me to \_\_\_\_\_ as described in this consent form.  
(name of other entity/person)

1. The specific data I want Waconia Public Schools to release include:

\_\_\_\_\_  
(explanation of data requested)

2. I understand that I have asked Waconia Public Schools to release the data.

3. I understand that although the data are classified as private at Waconia Public Schools,

classification/treatment of the data at \_\_\_\_\_ depends on laws or policies  
(name of other entity/person)

that apply to \_\_\_\_\_.  
(name of other entity/person)

This authorization to release expires \_\_\_\_\_.  
(date/time of expiration)

Individual data subject’s signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/guardian’s signature [*if needed*] \_\_\_\_\_ Date \_\_\_\_\_