## **WAIVER OF CONFIDENTIALITY - ISD 91**

## **Sharing Information with Other Programs**

Dear Parent/Guardian:

lriihiluoma@isd91.org.

| To save you time and effort, the information you gave on your Application for Educational Benefits may be shared with other programs for which your children may qualify. For the following programs, we must have your permission to share your information. Please check the programs you would like us to share your information with:  Athletics/Activities Director - for 50% off participation fees  High School Counselor - for FREE ACT and AP testing  Preschool Classes - for tuition discounts on preschool classes |                  |                |   |        |   |
|--|------------------|----------------|---|--------|---|
|  |                  |                | If you checked yes to any or all of the boxes above, fill of information is shared for the child(ren) listed below. You programs you checked. |        | • |
|  |                  |                | Child's Name:   | Grade: | _ |
|  |                  |                | Child's Name:   | Grade: | _ |
| Child's Name:  | Grade:           | _              |   |        |   |
| Child's Name:  | Grade:           | _              |   |        |   |
| Child's Name:  | Grade:           |                |   |        |   |
| Signature of Parent/Guardian:  |                  | Date:          |   |        |   |
| Printed Name:  |                  |                |   |        |   |
| Address:   |                  |                |   |        |   |
| For more information, you may call Lisa Riihiluoma at 2  | ·18-389-6978 x10 | 01 or email at |   |        |   |

Return this form to: Barnum Public Schools District Office, 3675 County Road 13, Barnum, MN 55707

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the <u>USDA Program Discrimination Complaint Form</u>, (AD-3027) at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- Mail: U.S. Department of Agriculture
   Office of the Assistant Secretary for Civil Rights
   1400 Independence Avenue, SW
   Washington, D.C. 20250-9410;
- 2. Fax: (202) 690-7442; or
- 3. Email: program.intake@usda.gov.

This institution is an equal opportunity provider.