



Parent/Guardian Authorization to Send IEP Documents and Related Information via Electronic Mail

Student Name:	Date of Birth:	ID#:
I hereby give my permission to the Chicago copies of my child's eligibility and Individu electronic mail (email). I understand that increase the risk that this information could this form, I assume all risks associated with the granting permission to send the IEP and extremely these documents via email until I notify the column revoking authorization to provide such described the send that t	alized Education Program receiving such confidentiand be inadvertently accessed he security of this emailed eligibility documents via en ase manager at my child's en alized.	(IEP) related documents via linformation via email could by third parties. By signing documentation. I understand ail, CPS will continue to sendention.
Information to be emailed to parent/guardian	<u>ı:</u>	
Check all that apply		
☐ Notification of Conference		
☐ Evaluation Reports, including Lear☐ Draft copies☐ Finalized copies	ning Environment Intervei	ntions form
☐ IEP Documents, including data coll☐ Draft copies☐ Finalized copies	lection forms	
☐ IEP Progress Reports and Report C	ards	
Certification of email address:		
I hereby certify that only email address that Chicago Public Schoo and IEP-related documents via email.	is m Is may utilize to provide th	ny email address, and it is the ne above-mentioned eligibility
If I do not give my permission, I understan documents will be provided to me by the Chhand delivery.	d that the above-mentior nicago Public Schools via U	ned eligibility and IEP-related nited States Mail or personal
Parent/Guardian/Adult Student's Signature:		
Date:		