RIDGEFIELD PUBLIC SCHOOLS

70 Prospect Street, Ridgefield, Connecticut 06877

Policy 5131.911 Form E <u>REPORT OF TEEN DATING VIOLENCE/CONSENT</u> TO RELEASE STUDENT INFORMATION

Date:	 	 	
Name of Student:	 	 	
School:	 	 	

To Parent/Guardian:

A report of teen dating violence has been made on behalf of your child alleging that he/she has been the victim of teen dating violence. In order to facilitate a prompt and thorough review of the report, the Ridgefield Public Schools may wish to disclose the fact that this complaint has been filed in connection with its review.

(Please check one):

_____ I hereby give permission for the Ridgefield Public Schools to disclose the fact that a complaint concerning my child has been filed as part of its review of that complaint.

_____ I do **NOT** give permission for the Ridgefield Public Schools to disclose the fact that a complaint concerning my child has been filed as part of its review of that complaint.

Signature of Parent/Guardian

Date

Name (please print)