Chicago Public Schools
OFFICE FOR STUDENTS WITH DISABILITIES
EMAIL osd@cps.edu
PHONE (773) 553-1800
MAIL 42 W. Madison St
Chicago, IL 60602

Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail

Student Name:_____ Date of Birth: _____ ID#: _____

I hereby give my permission to the Chicago Public Schools -District #299 (CPS) to provide me with copies of my child's eligibility, Individualized Education Program (IEP), and 504 related documents via electronic mail (email). I understand that receiving such confidential information via email could increase the risk that this information could be inadvertently accessed by third parties. By signing this form, I assume all risks associated with the security of this emailed documentation. I understand by granting permission to send the IEP and eligibility documents via email, CPS will continue to send these documents via email until I notify the case manager at my child's current school, in writing, that I am revoking authorization to provide such documents via email.

Information to be Emailed to Parent/Guardian

Check all that apply:

- Notification of Conference
- Evaluation Reports, including Learning Environment Interventions form
  - Draft copies
  - Finalized copies
- IEP Documents, including but not limited to data collection forms and SSCA documents
  - Draft copies
  - Finalized copies
- 504 Documents, including but not limited to assessments and data collection forms
  - Finalized copies
- IEP Progress Reports and Report Cards
- School Assignment Letter

Certification of Email Address

I hereby certify that _____is my email address, and it is the only email address that Chicago Public Schools may utilize to provide the above-mentioned eligibility and IEP/504-related documents via email.

If I do not give my permission, I understand that the above-mentioned eligibility and IEP/504-related documents will be provided to me by the Chicago Public Schools via United States Mail or personal hand delivery.

Parent/Guardian/Adult Student's Signature: _____

Date:_____