



Exhibit C

CaliforniaColleges Website Consent to Release Student Records

Sacramento City Unified School District is working with the California College Guidance Initiative (CCGI), which operates under the Foundation for California Community Colleges (Foundation) to provide your child with a free web-based account that will help him/her track academic progress and explore colleges and careers. This effort also will help your child's school improve programs and services that support your child.

Student data in the online accounts will be stored securely. Your child's data will only be released to the Foundation or CCGI after we have received this signed consent form from you. The Foundation or CCGI later may release certain data to colleges or scholarship providers that may offer an opportunity for your child – but only if your child is notified of the specific request and permits the Foundation or CCGI to release this information.

Pursuant to the Family Education Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g, we are requesting your consent to disclose the following individually identifiable information from your child's education records to the Foundation or to CCGI and to the subsequent disclosure of that information to colleges or scholarship providers that may offer opportunities for your child. This information will be included in your student's individual online account. (To comply with FERPA and privacy requirements regarding the Free and Reduced Price Meals (FRPM) program, this form should be signed by the student's parent or guardian or, if the student is 18 years or above, by the student.)

CONSENT

I, _____ (insert name(s)), hereby agree to allow the District to disclose to the Foundation or CCGI the following records:

- **student demographic information (i.e. name, date of birth, gender, grade level, school name)**
- **student coursework, grades received, GPA**
- **student test records (i.e. SAT and ACT scores)**
- **student ethnicity information, and free and reduced lunch status**

See the other side

For:

Student Information	
Student Full Name :	Student ID Number:
Home Address:	School: Grade:
Birth Date: (mm/dd/yy)	
Parent Information	
Are you the legal guardian of this student? Yes / No	Relationship to student:
Parent/Guardian's Full Name:	Phone Number:
Signature	
PARENT/GUARDIAN SIGNATURE: X	Date (mm/dd/yy):
Eligible Student Signature (if age 18 or older): X	Date (mm/dd/yy):

This authorization is valid for six months after your child graduates from high school or withdraws from Sacramento City Unified School District. You may revoke this authorization at any time by submitting a letter to your child's counselor.

With respect to any individually identifiable information regarding your child's eligibility for free or reduced price meals or free milk under the FRPM program, failing to provide consent will not affect your child's eligibility for free or reduced price meals or free milk.

NONCONSENT – Sign this box if the parent/eligible student does NOT consent	
STUDENT FULL NAME:	
PARENT/GUARDIAN SIGNATURE: X	Date (mm/dd/yy):
Eligible Student Signature (if age 18 or older): X	Date (mm/dd/yy):

If you have any questions about this form, please call your child's counselor.