

5621 Strand Blvd - Suite 108
Naples, FL 34110
239-254-9807 ♦ fax 239-254-8267
addam@aplusskills.com

TEACHER INFORMATION PERMISSION FORM

From time to time we find that it is beneficial for our tutors to contact the child's teachers, guidance counselor or other school personnel. There are however, various privacy rules which we and the school personnel must adhere to. Therefore, we need your written permission to make these contacts and for the school personnel to discuss your child's situation.

If you would like the tutor to contact your child's teacher or teachers, please fill out the information below and sign this form.

Student's Name:
School:
School's Telephone Number:
Teacher's(s) Name:
Email Address(es):
Guidance Counselor(optional)
Subject(s) to be discussed:
Teacher's(s) email address:
I (we) hereby give permission for A+ Skills Tutoring Service to discuss my child's situation with school personnel and likewise, the school personnel have my (our) permission to release information to the tutor and discuss my (our) child's situation.
Agreed and acknowledged Parent(s) Name(s)
Signature: Date:
Please return to: Addam Cohn, <u>addam@aplusskills.com</u>