



PAOLA UNIFIED SCHOOL DISTRICT #368

1115 E. 303rd St. Phone: (913)294-8000
Paola, KS 66071 Fax: (913)294-8001 www.usd368.org

W. Matthew Meek Tammy Thomasson Jimmy Hay Brenda Caldwell
Superintendent Asst. Superintendent Director of Finance Director of Human Resources

Consent for Disclosure Sharing Information with Other Programs

Dear Parent/Guardian:

You do not have to sign or send in this form to get reduced price or free Child Nutrition Program benefits for your children. If you do not sign the Consent of Disclosure, it will not affect eligibility for or participation in the Child Nutrition Programs.

To save you time and effort, information about your children's eligibility for reduced price or free Child Nutrition Program benefits may be shared with other programs for which your children may qualify. For the programs listed below, we must have your permission to share your information.

- Yes, I DO** want school officials to share information about my children's eligibility for Child Nutrition Program benefits only with the programs I have checked below.
- Textbook Fees
 - ACT Test Fees
 - Read-Write Program
 - _____

If you checked yes to any or all of the boxes above, fill out the form below. Your information will be shared only with the programs you checked.

Child's Name: _____ School: _____

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Child's Name: _____ School: _____

Child's Name: _____ School: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Address: _____

For more information, you may call or e-mail:

School Official's Name: Crystal Brockway Phone: 913-294-8010 ext. 5107
E-Mail: crystal_brockway@usd368.org

Return this form to the address below by _____.

Address: 401 N. Angela St. Paola, KS 66071