Career Opportunity Career Assessment Center

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CAREER OPPORTUNITY ACADEMY (C.O.A.). Purpose: This form gives the sending district permission to release information which is necessary for the appropriate completion of a C.O.A. career assessment. RE: Student Name DOBSchool Grade Parent / Guardian Printed Name School District is hereby authorized to release the specific personally identifiable data contained in the child's educational records in order to complete a career assessment, including but not limited to: IEP, ETR, 504 plan, attendance records, report cards, discipline records, behavior checklists, social security number, etc.; concerning my child (ward), named above, to CAREER OPPORTUNITY ACADEMY (C.O.A) for the purpose of intake assessment. B. PARENT CONSENT FORM FOR RELEASE OF PERSONALLY IDENTIFIABLE DATA FROM CAREER OPPORTUNITY ACADEMY (C.O.A.) Purpose: This form gives CAREER OPPORTUNITY ACADEMY (C.O.A.) permission to release the information collected in the C.O.A. career assessment to the sending district named above. The CAREER OPPORTUNITY ACADEMY (C.O.A.) is hereby authorized to release information collected in the C.O.A. career assessment concerning my child (ward), name above to the school listed above.

A. PARENT CONSENT FORM FOR RELEASE OF PERSONALLY IDENTIFIABLE DATA TO

I hereby give permission for CAREER OPPORTUNITY ACADEMY (C.O.A.) to complete a career assessment on my son/daughter, (ward) and transport if applicable.

I agree to sections - A, B. and C as described above.

C. PERMISSION TO COMPLETE A CAREER ASSESSMENT (i.e. vocational history, completion of

interest surveys and record review and other assessments as deemed appropriate)

Parent or Guardian Signature Date

Address