

Parental Permission For Exchange of Information

Agency Name:	Sterling Montessori Academy and Charter School
Address:	202 Treybrooke Drive, Morrisville, NC 27560
Phone:	919-462-8889
Fax:	919-462-8890

The above agency has permission to exchange information to assist in determining educational needs for:

Student Name: _____

Birthdate: _____

With the following agency:

Agency Name: _____

Address: _____

Phone: _____

The following items are being requested:

This information will not be given to a third party without this document expressing parental permission.

Parent Name: _____

Parent Signature: _____

Address: _____

Today's Date: _____