

Acknowledgment of Receipt of *Notice of Privacy Practices*

(Use this form when Parent or Legal Guardian has consented to their child's services)

Name of Student
Receiving Services: _____ , _____ D.O.B. _____
Last Name First Name

Dear Parent of Legal Guardian,

Please check below and sign to acknowledge that you received a copy of the **James Morehouse Project** (formerly *ECHS Community Project*) ***Notice of Privacy Practices***:

__YES, I did receive a copy of the **James Morehouse Project** (formerly ECHS Community Project) ***Notice of Privacy Practices***.

Parent/Legal Guardian's Printed Name: _____
First Name Last Name

Signature: X _____ Date: _____
(Parent or Legal Guardian)

Please sign and return all 4 pages to:

James Morehouse Project, Rm A-210
El Cerrito High School
540 Ashbury Avenue, El Cerrito, CA 94530