

**James Morehouse Project**  
(formerly the ECHS Community Project)  
El Cerrito High School – Room A210 – Phone: 510.524.8252

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**Authorization for Sharing of Information**

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Confidentiality Statement: Any information that the James Morehouse Project receives about students is kept protected at the James Morehouse Project under strict confidentiality laws and policies, as described in the James Morehouse Project (formerly the ECHS Community Project) Notice of Privacy Practices.

Full name of student (client): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**AUTHORIZATION TO SHARE SCHOOL RELATED INFORMATION:**

**Yes No (In order to provide the most effective counseling/youth development services, please check "Yes".)**

- I give permission for El Cerrito High School staff to share school-related information with the James Morehouse Project (for example: attendance, discipline records, grades, test scores, etc.)

**Yes No (In order to provide the most effective counseling/youth development services, please check "Yes".)**

- I give permission for James Morehouse Project staff, interns and partners to share limited health information with school staff regarding issues that affect the student's performance at school.

*By signing below, I give my consent for James Morehouse Project staff and El Cerrito High School staff to share the above information between each other.*

This consent is effective until (date): \_\_\_\_\_, or it will expire in one year.

Authorization of consent may be revoked at any time by written and signed statement.

Signature of Student (optional): \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Signature of Parent/Guardian: X \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_

