Assignment Parental Consent

I, ________________, am a currently attending graduate school through the SCCOE’s Educator Preparation Program. As part of an assignment, I am required to ________________. No identifying information will be used for this assignment. If your child’s IEP is used in the process of completion of this assignment, all identifying information will be redacted. Any write-up I provide as a submission for this assignment will use an alias name. If you agree to allow me to use your child’s information for this purpose, please sign and date below.

____________________________                            ___________
Parent Signature               Date