



SPECIAL RELEASE OF STUDENT INFORMATION CONSENT FORM

The collection and maintenance of a student's personally identifiable information requires special care to ensure the privacy rights of students and compliance with legal requirements governing these records, including the Family Educational Rights and Privacy Act (FERPA) and LRS 17:3914. The St. Tammany Parish School Board will maintain student records and personally identifiable information as confidential and will use reasonable commercially available steps to maintain as such. St. Tammany Parish School Board will follow all local, state and federal data security laws and policies and only share the data that is required for the purpose stated.

Your student has elected to participate in the **Virtual School - Microsoft Office Specialist certification program**. One of the requirements for this program is that student information will be used and/or released as part of their participation. Since this is a requirement for this program, if you elect not to have your child's information used or released, then your child's schedule will be changed to remove the class in which this content is taught. For more information and to read the Privacy Statement, go to <https://home.pearsonvue.com/Legal/Privacy-and-cookies-policy.aspx>. The following information about your student will be used and/or released:

- Student name, address, telephone number, email address
- Student date of birth, Social Security number, mother's maiden name
- Student testing history, education information
- Results on certification test

The information will be shared with the following entities:

- Louisiana Department of Education
- Microsoft
- GMetrix
- Certiport/Pearson VUE (online test center)

I HEREBY CONSENT to the release and use by St. Tammany Parish School Board of my child's personally identifiable information to any person or entity providing services to St. Tammany Parish School Board for this class/program and who requires my child's personally identifiable information in order to perform those services.

Signature of Parent/Legal Guardian

Child's Full Name

Printed Name of Parent/Legal Guardian

Date

School Name _____