

# ▶ Manhattan Star Academy

A member of the YAI network.

## Parent Authorization for E-Mail Use Permission Form

Child's Name: \_\_\_\_\_

Child's ID#: \_\_\_\_\_

Child's DOB: \_\_\_\_\_

e-mail address: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

I, \_\_\_\_\_ (Parent/Guardian), give my consent to have an NYL Teacher/Service Provider, or NYL Supervisor, correspond with me via Internet E-mail. I understand NYL will utilize rigorous administrative, technical, and physical safeguards, utilizing password protection, encryption, firewall, and other technologies to safeguard the confidentiality of these correspondences.

Parties authorized to be involved in email communication:

\_\_\_\_\_  
\_\_\_\_\_

The following information may be shared via email:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(initial) I give permission for the NYL Supervisor to email any materials for my child's IEP to the CPSE Administrator handling my child's case. This may include, but is not limited to, consent forms, IEP pages, and progress reports.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_