



**REACH Georgia Application
2017-2018 Academic Year**

Release of Information, Consent and Certifications

Consent to Photograph, Film, or Videotape a Student for Non-Profit Use

I, _____ (Print Name of Parent/Guardian), hereby give permission to the school, the School System, Georgia Student Finance Authority, the Foundation affiliated with REACH Georgia, and other REACH Georgia affiliates to use photographs, video images, writing, voice recordings of my student and his or her immediate family in news reports, newsletters, REACH Georgia website content, program marketing materials, graduation programs, articles, and/or other media outlets.

I also grant the right to edit, use, and reuse said products for non-profit purposes including use in print, on the Internet, and all other forms of media. I hereby release the REACH Georgia Scholarship Program, Georgia Student Finance Authority, REACH Georgia Foundation, and the _____ School System and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

I give consent

I DO NOT give consent

Certifications

I, _____ (Print Name of Parent/Guardian) certify that all of the information provided on behalf of my student in this application and on any other document or writing completed by us in connection with the Application is true, correct and complete to the best of our knowledge. To the best of our knowledge, I/my student meet(s) the eligibility requirements detailed in the application.

I acknowledge and understand that any false or misleading information written in this application may result in the disqualification of my student from participation in the REACH Georgia Scholarship Program.

Applicant Name: _____ Date: _____

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

FERPA RELEASE FORM

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 C.F.R. Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

In accordance with FERPA, it is the policy of the school system to withhold certain educational records unless the student or his or her guardian provides consent to disclose information. The purpose of this form is to provide the consent to the school system required by FERPA to allow Georgia Student Finance Authority, the REACH Georgia Foundation, Inc., and other REACH Georgia affiliates, and their employees, to access necessary educational records on all REACH Scholars.

I, _____, (Print Name of Parent/Guardian), hereby authorize _____ (Print Name of School) school to release and/or discuss my child's educational records with Georgia Student Finance Authority, the REACH Georgia Foundation, Inc., and other REACH Georgia affiliates, and their employees, for the purpose of benefiting my child, the REACH Georgia Scholarship Program, the School System and any research benefitting the State of Georgia's educational programs or initiatives.

Further, I authorize Georgia Student Finance Authority, the REACH Georgia Foundation, Inc., and other REACH Georgia affiliates, and their employees, to use photographs, video images, writing, voice recordings, name, grade level, dates of attendance, awards received, and other academic achievements of my child named above, in news reports, newsletters, REACH Georgia website content, program marketing materials, graduation programs, articles, and/or other media outlets. I also hereby provide express permission for the release by the school or district to the media, postsecondary institutions and governmental entities involved of my child's name, grade, school name, mailing address, email, honors my child has received, and academic progress (grade, attendance, and behavior reports).

Applicant GTID Number: _____

Applicant Name: _____ Date: _____

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____