

Oyster Bay-East Norwich Central School District  
150 East Main Street  
Oyster Bay, NY 11771  
(516) 861-3200

School Year: \_\_\_\_\_

Parent/Guardian of \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Name: \_\_\_\_\_  
DOB: \_\_\_\_\_

Dear Parent/Guardian:

As you know, the Committee on Special Education for the Oyster Bay-East Norwich Central School District is now responsible for providing Special Education Programs and/or Related Services to your child while he/she is attending either St. Dominic High School, St. Dominic Elementary School or East Wood School. According to new regulations from the New York State Education Department, Oyster Bay-East Norwich is considered to be the District of Location for students that attend these non-public schools. The home district of the student is considered to be the District of Residence.

Districts of Location are eligible to receive reimbursement for the provision of services for those non-resident students that are parentally placed in non-public schools within its borders. However, before we can claim reimbursement, we need to have your permission to release information about your child's services to the District of Residence.

Please provide the district with your consent by signing the form below. We appreciate your prompt response to this request.

Sincerely,



Lynette Abruzzo  
Director of Special Services

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**Consent for Release of Information**

I, \_\_\_\_\_ as parent/guardian of  
(Please print parent/guardian name)

**Student Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

give permission to the \_\_\_\_\_ School District Committee on Special Education to disclose information from my child's educational records to the Oyster Bay-East Norwich Central School District for the sole purpose of claiming reimbursement for the initial evaluation and/or provision of special education services included in my child's Individualized Education Service Place (IESP).

**Signature:** \_\_\_\_\_  
(Parent/Guardian)

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