



Dear Student:

Please find below a letter that needs to be signed and returned so that the Education Department has permission to release information to people (Parents, Guardian, Grandparents, Spouse, or even children) you wish. Please be very specific on the information that you will let be released.

If you have any questions, please feel free to contact me at 918-540-2535 ext. 10 or 800-259-9987 ext 10.

Mandie Ferguson
Education Director

**PEORIA TRIBE OF OKLAHOMA
EDUCATION OFFICE
PO Box 1527, Miami, OK 74355
918-540-2535**

CONSENT FOR RELEASE OF EDUCATION INFORMATION

I _____ hereby give my consent for
(name of officially authorized individual)
disclosure of Education information pertaining to education status of
_____, DOB: _____, of the Peoria
(name of requested individual)
**Tribe of Indians of Oklahoma to the following individual(s) and/or
institution(s):**

Information to be released:

(Be very specific here on what information can be released. Ex: Education Department may discuss any and all information pertaining to my education with persons listed below.)

Name and address of Person (Parents, Guardian, Grandparents, Spouse, or even children) or Institution information is to be released to:

(For additional people please continue on back)

(Name)

(Address)

(City) (State) (zip code)

Signed: _____
(Legal authorized individual)

Date: _____

1001. Statements or entries generally

Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willingly falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both.

June 25, 1948, c. 645, 62 Stat. 749