



PLEASE TYPE OR PRINT WITH A BALLPOINT PEN.

I, the undersigned legal guardian of:

Student Name: _____

Student ID: _____

Hereby authorize _____ **to sign the following forms:**

PACE Enrollment Transaction Form

PACE Personal Information Sheet

Consent to Share Information

Other _____

Designee Information:

Name: _____

Phone: _____

Email: _____

Permission granted:

Permission is hereby granted for the time:

Beginning: _____

Ending: _____ OR _____

Until permission is revoked.

By authorizing the above-named student or designee to sign the approved forms, I certify that he or she is capable of making the decisions necessary to sign those forms with knowing consent.

The legal guardian retains the right to withdraw this authorization at any time.

Printed Name

Signature

Date