

## **REAXIUM MOBLIE APPLICATION ACKNOWLEDGEMENT AND CONSENT**

The Family Educational Rights and Privacy Act of 1974 (FERPA) and Section 1002.22, 1002.221, and 1002.222, Florida Statutes are designed to protect the privacy of students' educational records and to establish the rights of its students to inspect and review their educational records. It is the policy of [ NAME OF PEMBROKE PINES CHARTER SCHOOL ] ("SCHOOL"), to maintain the confidentiality of each student's education records in accordance with FERPA.

I, the undersigned, hereby authorize SCHOOL and its authorized representatives to release records associated with the student whose name appears below, held by SCHOOL, to REAXIUM, INC. These records may include, but are limited to, the students name, address, bus route, grade level, and SCHOOL bus ridership information.

I authorize SCHOOL to release student's records to REAXIUM, INC. so that REAXIUM, INC. may use the records to develop and manage transportation and student rider management system software that will allow SCHOOL to effectively and efficiently collect student ridership data associated with bus transportation services provided by SCHOOL. REAXIUM, INC. will hold records in strict confidence and will not use or disclose records for any unauthorized purpose.

I acknowledge by my signature that I understand that although I am not required to grant authorization to my child's records to REAXIUM, INC. I am giving my consent to release the information. I understand that this release remains in effect until I revoke such consent in writing and written revocation is delivered to SCHOOL and REAXIUM, INC. I understand that any such revocation shall not affect disclosures previously made by SCHOOL to REAXIUM, INC. prior to the receipt and processing of any such revocation.

I agree to hold the City of Pembroke Pines, SCHOOL and REAXIUM, INC. harmless from any liability that may arise related to the acknowledgement and consent contained herein.

I, the undersigned have read this acknowledgement and waiver and fully understands its terms. I acknowledge and agree that no representation, statement or inducements apart from what is written in this waiver has been made to me by City. I expressly agree that this acknowledgement and waiver agreement is intended to be as broad and inclusive as is permitted by the laws of Florida and if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Parent/Guardian's Signature

Parent/Guardian's Name Printed

Date

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First and Last Name of Child

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