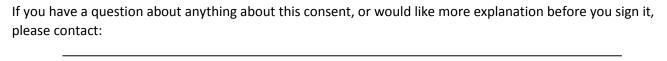
## Request (to release) from Government

It is necessary for a government entity to release an individual's private data to an outside entity or person. The entity must get the individual's informed consent because the entity does not have statutory authority to release the data, or the outside entity/person was not named in the Tennessen Warning.

## Explanation of your rights

- You have the right to choose what data we release. This means you can let us release all of the data, some of the data, or none of the data listed in this consent. Before you give permission to release the data, we encourage you to review the data listed in this consent.
- You have the right to let us release the data to all, some, or none of the persons or entities listed on this form. This means you can choose which entities or persons may receive the data and what data they may receive.
- You have the right to ask us to explain the consequences for giving your permission to release the data.
- You may withdraw your permission at any time. Withdrawing your permission will not affect the data that we have already released because we had your permission to release the data.
- You may give us permission to discuss the data released by this form with the outside entity. If you choose not to give us permission, you may still allow us to release the data.



Entity contact person name, phone number, email address

## Permission to release

I, [DATA SUBJECT NAME], give my permission for [GOVERNMENT ENTITY NAME] to release data about me to [NAME OF OTHER ENTITY/PERSON] as described in this consent. I understand that my decision to allow release of the data to [NAME OF OTHER ENTITY/PERSON] is voluntary.

- 1. The specific data that [GOVERNMENT ENTITY NAME] may release to [NAME OF OTHER ENTITY/PERSON] are [EXPLANATION OF DATA].
- 2. I understand [GOVERNMENT ENTITY NAME] wants to release the data for this reason: [EXPLANATION OF REASON FOR THE RELEASE].
- 3. I understand that although the data are classified as private at [GOVERNMENT ENTITY NAME], the classification/treatment of the data at [NAME OF OTHER ENTITY/PERSON] may not be the same and is dependent on laws or policies that apply to [NAME OF OTHER ENTITY/PERSON]. [INCLUDE OTHER CONSEQUENCES]
- 4. [OPTIONAL]. I give [GOVERNMENT ENTITY NAME] permission to discuss the data released by this consent with [NAME OF OTHER ENTITY OR PERSON].

[OPTIONAL] This permission to release expires [DESCRIBE TIME OR DATE OF EXPIRATION].	

Name, Signature (Parent/Guardian Signature), Date