



Dear Parents,

Thank you for trusting us with your child's education. It is a privilege to be a part of their academic path to success. Several times over the course of the school year, we are in contact with Mrs. Amy DiPaula, your child's EPIC CHARTER SCHOOL teacher in order to sustain the highest quality standards in our instruction and methods. For this reason, I kindly ask that you read over this form giving us authority to make decisions on behalf of your child.

I _____(parent) give Mrs. Amy DiPaula, my student’s Epic Charter School teacher, permission to do the following:

Share my child’s test scores or any other educational/academic information with Suzan Khaimi and the teaching staff at OIA.

Schedule meetings and assessments for my student with the staff at OIA.

Develop my student’s educational plan with Suzan Khaimi and teaching staff at OIA.

Arrange field trips for my student with staff at OIA.

Make purchase orders from my student’s Epic learning fund for any and all teaching resources or field trips.

My permission remains in effect as long as my student is enrolled at Epic Charter Schools and attending OIA.

_____Date_____

Signature of Parent

Name of Student