

## **Consent for the release of FAFSA Completion through the Data Sharing Project**

The Data Sharing Project (DSP) is a community project that works with partners in Forsyth County who provide education-based services and programs for students. This consent form is required to release of FAFSA completion information through DSP to **Crosby Scholars Senior Advisors**. Completion of this consent is voluntary.

***Please note***, NO financial information is released under this consent. ONLY Student Name, School, code identifying FAFSA application status (Not Submitted, Complete, or Submitted), Signed by parent, Signed by student, or flagged for verification and code can be released under this consent. Your student's individual information will never be published or shared with partners outside of this consent (**Crosby Scholars and DSP Staff**).

I/We (**Please Print**) \_\_\_\_\_ are the

Parents/Legal Guardians of WS/FCS Student: \_\_\_\_\_  
*(Student name; First/Middle/Last; Please Print)*

By Signing Below, I/We consent to the release of FAFSA Completion information with Crosby Scholars Senior Advisors through the Data Sharing Project.

AND I/We understand data will be used to create a FAFSA Completion report for Crosby Scholars (Aggregate) and other DSP research and analysis projects for Crosby Scholars. This will not lead to the identification of my student in any way.

AND I/We understand this consent is valid for as long as my Student participates with Crosby Scholars or unless revoked in writing. To obtain information on how to submit your written revocation of consent, please contact Winston Salem/Forsyth County Schools Equity & Accountability Department at (336)-703-6719.

**Please provide the following about your STUDENT to ensure secure use of their records:**

Student ID (Lunch Number): \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_

School: \_\_\_\_\_

**Parent(s)/Guardian(s)/Other Signature:**

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Date: \_\_\_\_\_