

Parent/Grandparent Consent Form
Findlay City Schools
2019 Broad Ave.
Findlay, OH 45840

Child's Name _____ **DOB** _____

Parent's Name _____ **Phone#** _____

Parent's Address _____ **City/ State/ Zip** _____

Grandparent's Name/s _____

Grandparent's Address _____ **City/ State/ Zip** _____

Parent's Current School District of Residence _____

Reason/s for making this request _____

Check one or both (for example, if one parent was advised and the other cannot be located):

- I have advised the parent(s) or other person(s) having legal custody of the minor of my intent to authorize enrollment of the minor in school and have received no objection. (Power of Attorney form required to be filed.)
- I am unable to contact the parent(s) or other person(s) having legal custody of the minor at this time, to notify them of my intended authorization. (Child Caretaker Authorization Affidavit form required to be filed.)

Grandparent Consent

I agree to have my grandchild, _____, live with me and attend school in the district in which I reside. I further agree to accept the responsibilities associated with the schooling of said child in the area of supervision, discipline, signing of forms and other authorizations, related to my grandchild attending school in the district.

Grandparent's Signature

Date

Parent Authorization

I consent and give my permission that my child, _____, who will be living with his/her grandparents at the address above, attend the school district where the grandparents reside. Further, I authorize the grandparents to sign all necessary forms and authorizations required by the school district for my child to enroll in school and participate in school activities.

Parent's Signature

Date

Please Note: The Findlay City School District reserves the right to rescind this agreement in the event of repeated misbehavior of the student, repeated violations of school rules, acts of violence, or the sale or distribution of drugs.

Enroll Student:

1. No Custody Agreement is needed but Grandparent must have State Power of Attorney form or Child Caregiver Authorization Affidavit form completed and filed in juvenile court.

Date POA or CAA Filed with Court: _____ **Date Copy of Document Received:** _____