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Indiana State Department of Health Permission to Release Information

I, _____, give Franklin Community Schools, permission to release the following information concerning my child, _____, to the Indiana State Department of Health's Children and Hoosiers Immunization Registry Program (CHIRP):

Name: _____

Date of birth: _____

Address: _____

Parent(s)/guardian(s) name: _____

Race: _____

Immunization Information: _____

I understand that the information in the registry may be used to verify that my child has received proper immunizations and to inform me or my child of my child's immunization status or that an immunization is due according to recommended immunization schedules.

I understand that my child's information may be available to the immunization data registration to another state, healthcare provider or provider's designee, local health department, elementary or secondary school, child care center, office of Medicaid policy and planning or contractor of the office of Medicaid policy and planning, licensed child placing agency, and college or university. I also understand that other entities may be added to this list through amendment to I.C. 16-38-5-3.

_____ I hereby consent to the release of such information while my child is in Franklin Community School Corporation.

_____ I **do not** consent to release of such information.

Signature

Date

Printed Name of Parent/Guardian

Child's Name

Grade Level

School

Indiana Immunization Registry Information Sheet

Dear Parent/Guardian:

Franklin Community School (FCS) is participating in Children's and Hoosiers Immunization Registry Program (CHIRP). CHIRP is a statewide data base used by physician's office, local health departments and schools, just to name a few, to track an individual's immunization status. **By state law, it is confidential.** Providers that use chirp must have an account with the state and each individual has a user identification and password. CHIRP has several security features that protect information transmitted to and from the system.

Benefits of using CHIRP are:

- Providers can determine when a child is due or overdue for vaccinations based on up-to date guidelines.
- Under and over immunization is reduced by viewing immunization records from multiple providers.
- Providers can print official immunizations cards as needed.
- Several states participate in a similar data base so if relocation is involved a complete immunization history is available.
- It reduces the amount of paper work that can be difficult to secure.

Why do schools use CHIRP?

- Reduces the possibility of error from not being able to read immunization dates on hand written records.
- Better for parents who may not be able to find immunization records due to frequent moves or disasters such as flood or a hurricane.
- State immunization report does not have to be submitted by fax or mail. The state can access the information directly, thus reducing the likelihood of information going to the wrong location.

Although the Indiana State Department Of Health has determined CHIRP does not violate Health Insurance Portability and Accountability Act of 1996 (HIPAA) under Indiana Code 16-38-5-3, the Indiana Department of Education has requested the school obtain parental permission before entering information. This permission is in accordance to the Family Educational Rights and Privacy Act (FERPA). Therefore in order for FCSC to enter your child's information into the data base, we are requesting your written permission. Attached is the form for you to complete. There will be no need to renew this form annually, once permission is obtained it will be effective for as long as your student is at FCSC.

If you have any questions regarding CHIRP or the attached form, please contact:

Mrs. Amanda Martin BSN, RN
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Email: martina@franklinschools.org