

Can we share your information with the San Francisco Department of Children, Youth and Their Families?

Boys & Girls Clubs of San Francisco

Participant Name: _____ **Date of Birth:** _____

The San Francisco Department of Children, Youth, and Their Families (DCYF) funds our agency and the services we provide. To fulfill the requirements of this funding, we share information about the participants in our services with DCYF. We are asking for your permission to share your personal information with DCYF.

DCYF relies on the information that we provide to understand the characteristics of participants in our programs and to ensure that San Francisco's most vulnerable children, youth, and families have access to services across the city. DCYF also uses the data to monitor our funding and to evaluate program activities and impacts.

By signing this form, you allow our agency and any subcontractors we may use to share information about your child's participation in our program (or your participation, if you are 18 years of age or older) with authorized staff at DCYF. The information that we report to DCYF includes:

- Personal information, such as name, date of birth, and address;
- Demographic information, such as race/ethnicity and gender identity;
- Education information, such as school name and grade level;
- Participation in activities and services, such as dates of participation and number of participation hours; and
- Anonymous and voluntary youth experience surveys.

DCYF works in close partnership with the San Francisco Unified School District (SFUSD). The information that we share with DCYF is also shared with SFUSD if it is related to an SFUSD student. Federal and state laws that govern the use and disclosure of student education records protect the privacy of this information. No information shared will ever be publicly reported in a way that may be used to identify you.

Your Rights: You do not have to sign or return this form. If this is the case, we will not share your information with DCYF. Choosing not to share information will not affect your child's participation (or your own participation, if you are 18 years of age or older) in our program. This form will expire on June 30, 2023, the end of DCYF's current funding cycle, but you may cancel it at any time by informing us in writing. If you cancel your permission, it will go into effect immediately, unless the information has already been shared. You have a right to receive a copy of this form.

Your Name: _____

Relationship to Participant: Parent Legal Guardian Participant 18 Years of Age or Older

Signature: _____ **Date:** _____