



**Light Up Learning**  
Sparkling Success. Igniting Hope.



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

To Whom It May Concern:

I, \_\_\_\_\_, parent/legal guardian of \_\_\_\_\_,

do hereby authorize **Light Up Learning, Inc. and/or its representatives** to request and obtain copies of any academic, psycho-educational, behavioral, medical and other documentation and/or evaluations and records (such as a IEP, FAB, BIP, ELP, etc.) relevant to the minor named above in past and current functioning, progress and standing in school.

If you should have any questions or comments concerning the same, please do not hesitate to contact me. Thank you.

\_\_\_\_\_  
Parent/Legal Guardian (print)

\_\_\_\_\_  
(sign)

Jessica B. Castillo, PCET  
President/CEO  
Light Up Learning, Inc.