

CONSENT FOR MENTAL HEALTH SCREENING

Department of Student Services
Lincoln Public Schools

I give consent for my child, _____, to be screened for the following mental health concern(s):

The screening will be done by the school social worker, who is a Licensed Mental Health Professional. I understand that upon completion of the screening the school social worker will contact me to share the results.

If I have any questions regarding my child's involvement in the screening process. I understand that I can contact my school social worker at:

Phone: _____ Email: _____

Parent/Guardian Signature: _____ Date: _____

Name of Student: _____ School Social Worker: _____

If signing electronically, complete this box:

By affixing my electronic signature to this electronic record below (either type your name or insert a scan of your signature) and emailing this electronic record to LPS, I agree and consent to conduct this transaction involving governmental affairs with LPS by electronic means pursuant to the Nebraska Uniform Electronic Transactions Act. I understand that I am not prohibited from refusing to conduct other or future transaction(s) with LPS by electronic means. See the Disclosure Notice on page 2 for further information.

Parent Signature: _____ Date of Receipt: _____
(please type your name or insert signature scan)

Disclosure Notice: This Disclosure Notice applies to the electronic record above and all communications with LPS related to this electronic record. Under this notice, the electronic record, communications, disclosures and other records you receive from LPS in electronic form will be considered "in writing."

Your consent covers the electronic record. You understand and agree that your electronic signature affixed to the electronic record shall be legally binding and shall be considered authorized by you. You also consent to receive all communications, disclosures, and notices, and other records relating to this from LPS in electronic form, instead of receiving such communication, disclosures, and notices, and other records in printed paper form. You have the option of printing your electronic records directly from your computer to provide your handwritten signature. The records will not be sent to you in a paper copy unless specifically requested by you. You will not be charged for paper copies of the records. To specifically request paper copies, please send an email to releaseofinformation@LPS.org. You will be able to sign a paper copy after school is in session.

You have the right at any time to cancel and withdraw your consent to receive future electronic delivery of records. If you withdraw your consent, none of the electronic records, communications, disclosures, notices, or other records delivered to you in electronic form prior to your withdrawal of consent will be affected. If you wish to withdraw your consent, please send an email to releaseofinformation@LPS.org. Your notice of withdrawal will be effective within a reasonable time after we receive the withdrawal notice.

In order to sign your electronic record electronically and in order to receive electronic delivery of communications, disclosures, notices and other records, you will need access to a computer with the following:

- a) Access to the following operating systems: Microsoft Windows or Apple macOS;
- b) Access to the Internet;
- c) Access to a valid e-mail address;
- d) A web browser (The use of Chrome is recommended);
- e) Access to software which permits you to receive and access Portable Document Format "PDF" files, such as Adobe Acrobat Reader;
- f) Sufficient storage space to save records, communications, disclosures, and notices, and other records (whether presented online, in e-mails, or in PDF format) or the ability to print such records, communications, disclosures, and notices, and other records;
- g) Access to a printer (if you wish to print paper copies of any electronic records, communications, disclosures, notices, or other records).

If we change the minimum hardware and/or software requirements, we will notify you of the changes. If you cannot access or retain electronic records, communications, disclosures, notices, or other records in electronic form as a result, you will have the right to withdraw your consent with respect to electronic delivery of such records.

It is your responsibility to keep your primary email address current so that we may send electronic records and communications. You understand and agree that if we send you an electronic record, communication, disclosure, or notice, but you do not receive it because your email address is incorrect, out of date, blocked by your service provider, or returned undeliverable, we will be deemed to have provided electronic delivery.

You acknowledge and agree that your consent to your electronic signature and electronic delivery is being provided in connection with a transaction affecting governmental affairs that is subject to the Nebraska Uniform Electronic Transactions Act and, to the extent required, by the federal Electronic Signatures in Global and National Commerce Act, and that you and we both intend that both acts apply to the fullest extent possible to validate our ability to conduct transactions with you by electronic means.