

Confidentiality of Information Agreement

Center for Accessibility & Neurodiversity – Illinois Valley Community College

The Center for Accessibility and Neurodiversity, hereafter referred to as CAN, is committed to ensuring that all information and communication pertaining to a student's disability is maintained as confidential as required or permitted by law.

The following guidelines about the treatment of such information have been adopted by CAN and will be shared with students. These guidelines incorporate relevant state and federal regulations.

- No one will have immediate access to student files in CAN except appropriate staff of CAN. Any information regarding a disability is considered confidential and will be shared only with others within the college who have a legitimate educational interest.
- This information is protected by the Family Educational Rights and Privacy Act, known as FERPA.
- Sensitive information in CAN's student files will not be released except in accordance with federal and state laws.
- A student's file may be released pursuant to a court order or subpoena.
- If a student wishes to have information about his/her/their disability shared with others outside the college, the student must provide written authorization to the Coordinator to release the information. Before giving such authorization, the student should understand the purpose of the release and to whom the information is being released. The student should also understand that there may be occasions when the Coordinator will share information regarding a student's disability as his/her/their discretion if circumstances necessitate the sharing of information and the Coordinator has determined that there is an appropriate legitimate educational interest involved.
- A student has the right to review his/her/their own file located in CAN with reasonable notification.

I have been informed of the policy regarding confidentiality and the release of information from my CAN file. I understand that CAN may release information from my file to be used in a confidential manner with appropriate college faculty, and officials who have a legitimate educational interest while I am a student at Illinois Valley Community College.

Date: _____, _____
Month Day Year

Printed Name of Student

Signature of Student

Printed Name of Coordinator

Signature of Coordinator