

# Camden Central Schools

## Student Support Services

Dear Parent/Guardian/Caregiver,

**Welcome** to the Camden School District. This information is being shared with you, if you have a child who has an IEP or a Section 504 plan.

Upon enrolling your child, we contact the previous district to obtain school records, a copy of the IEP or Section 504 plan, assessments/evaluations that were completed and any other pertinent information (medical, etc.). There is sometimes a lag in obtaining this information. If you have a copy of the IEP and any of the evaluations/assessments, as well as updated medical information, please share with the registrar as this is very helpful.

We will review all of the information from the previous district to provide comparable services. If your child was in a special education program (example, 12:1:1, 8:1:1, 6:1:1), we will look for a similar program. Some of these programs are offered at different sites.

Please complete/sign the attached form for us to obtain information and a script from your child's pediatrician, if your child receives any related services.

Bus routes are determined by the transportation department. If you would like to inquire about an approximate pick-up/drop-off time you may contact them directly at 315-245-0878.

If your child receives special transportation or attends an out-of-district program and will **not** need transportation to school on any day, **please notify the Bus Garage directly at 315-245-0878** as soon as possible. You can leave a message at any time of day.

Please be sure to obtain a copy of the Camden school calendar – these are available online at our website ([www.camdenschools.org](http://www.camdenschools.org)) and from the registrar.

**The Student Support Services Office will contact you regarding a start date.**

If you have any questions or concerns, please contact our office at the phone numbers listed below.

Tamalin Martin, SDA  
Director, Student Support Services

Nicholas Pulizzi, SDA  
Assistant Director, Student Support Services

### **Student Support Services Office (2 locations)**

*Tamalin Martin - Director* Phone (315) 245-3410 –dial 1  
*Christine Clements – Office Support Staff* Fax (315) 245-4625  
*Camden Elementary School Building: supporting PreK – 4<sup>th</sup> grades and out of district*

*Nick Pulizzi - Assistant Director* Phone (315) 245-3410 –dial 2  
*Lisa Wandell- Office Support Staff* Fax (315) 245-4424  
*Camden Middle School Building: supporting 5<sup>th</sup> – 12<sup>th</sup> grades*

**Camden Central School District  
Student Support Services**

AUTHORIZATION FOR RELEASE AND SHARING OF GENERAL PROTECTED HEALTH INFORMATION BETWEEN  
PHYSICIAN/MEDICAL OFFICE AND CAMDEN STUDENT SUPPORT SERVICES OFFICE

**Child's Name:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**Medicaid CIN#:** \_\_\_\_\_

**Pediatrician's Name/Group:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Physician Phone:** \_\_\_\_\_

**Physician Fax:** \_\_\_\_\_

THIS AUTHORIZATION IS NOT VALID AFTER: \_\_\_\_\_  
(Expiration Date)

This pertains to any information created within 12 months after the date this authorization is signed, as well as past information.

I understand that my Protected Health Information is protected under the federal and state regulations and the Health Insurance Portability and Accountability Act (HIPPA), 45 CFR Parts 160 & 164, and cannot be disclosed without my written consent unless otherwise provided for in the regulations or law. I reserve the right to revoke this authorization in writing or any time prior to the expiration of this authorization.

**I hereby grant my permission to obtain physician's medical report/immunization record and prescription for updated evaluations and provision of related services from my child's physician.**

Signature of Parent/Guardian: \_\_\_\_\_

**Printed Full Name of Parent/Guardian:** \_\_\_\_\_

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

Return to: Camden Student Support Services.

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**Student Support Services Office**

*Tamalin Martin - Director  
Supporting PreK – 4<sup>th</sup> grades and out of district  
Camden Elementary School Building: 1 Oswego St. Camden, NY 13316*

*Phone (315) 245-3410 –dial 1  
Fax (315) 245-4625*

*Nick Pulizzi - Assistant Director  
Supporting 5<sup>th</sup> – 12<sup>th</sup> grades  
Camden Middle School Building: 32 Union St. Camden, NY 13316*

*Phone (315) 245-3410 –dial 2  
Fax (315) 245-4424*