

Appendix F: Probation Consent for Release of Confidential Information

CONSENT FOR THE RELEASE OF CONFIDENTIAL INFORMATION

The Massachusetts Probation Service is in possession of confidential information about

[PRINT name of individual]

I, or a person authorized to act on my behalf, consent to Probation's disclosure of confidential information about me or from my Probation file for the purposes of treatment, services, or other rehabilitative intervention to:

[PRINT name of individual(s) or business name of provider(s)]

Signature of
Individual _____ Date _____

or

Signature of Person authorized to sign for Individual

Check one: ☐ Parent ☐ Guardian ☐ Other: [must specify] _____ Date _____

Probation witness signature:

Probation witness title: ☐ CPO ☐ FACPO ☐ ACPO ☐ PO ☐ APO

If you believe your confidential information includes references to substance abuse, HIV,* or other health information or treatment, please read and sign below:

I understand Probation may possess confidential information about my substance abuse, HIV, or other health information which is protected by federal and state law. By signing below, I consent to Probation's disclosure of any of this type of confidential information for the purposes stated above. I may revoke my consent at any time in writing to Probation for any future disclosures. My consent expires at the end of Probation's involvement in my case.

Signature of Individual _____
Date _____

OR

Signature of Person authorized to sign for Individual

Check one: ☐ Parent ☐ Guardian ☐ Other: [must specify] _____ Date _____

Probation witness signature:

Probation witness title: ☐ CPO ☐ FACPO ☐ ACPO ☐ PO ☐ APO

TO INDIVIDUAL OR PROVIDER RECEIVING THIS CONFIDENTIAL INFORMATION

This confidential information has been disclosed to you from records protected by federal confidentiality rules (42 CFR Part 2) and state confidentiality laws (G.L. c. 111, §§ 70E and 70F, G.L. c. 112 §§ 129A, 135A, 135B, 172A).

CFR Part 2) and state confidentiality laws (G.L. c. 111, §§ 70E and 70F, G.L. c. 112 §§ 129A, 135A, 135B, 172A). These rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by law. A general authorization for the release of medical or other information is not sufficient for this purpose. The federal rules restrict any use of this information to criminally investigate or prosecute any alcohol or drug abuse patient.

* Probation allows individuals to cross out categories of information (e.g., HIV/AIDS...) if they don't want to share that kind of information.