

GREENWICH HIGH SCHOOL

REQUEST TO WITHHOLD DIRECTORY INFORMATION

I hereby request the Greenwich High School not disclose directory information concerning my child to military recruiters or institutions of higher education.

STUDENT INFORMATION (Please Print)

LAST NAME: _____

FIRST NAME: _____

GRADE: _____ HOUSE: _____

PARENT SIGNATURE: _____ DATE: _____

This request to withhold directory information will remain in effect while your child is enrolled as a student at Greenwich High School, unless otherwise notified in writing.

**RETURN THIS REQUEST TO THE MAIN OFFICE AT
GREENWICH HIGH SCHOOL
10 HILLSIDE ROAD, GREENWICH, CT 06830**

NO LATER THAN FRIDAY, September 3, 2021

Please return this form **only** if you do not want directory information shared with military recruiters and institutions of high education.