

FERPA Directory Information Opt-Out Form For All Students

Complete this form to exercise your right to privacy.

The district has designated a student's **name, address, email address, telephone number, date and place of birth, information about the student's participation in officially recognized activities and sports, student's weight and height (if a member of an athletic team), student's dates of attendance, grade level, honors and awards, photograph (excluding video records), and major field of study** as directory information which means under the Family Education Rights and Privacy Act ("FERPA") that this information can be released without your consent. If you **do not** want this information released to people requesting directory information, **the parent/guardian or eligible student (18 years of age or older) must sign this form and return it to the school office within one month after enrollment. This opt-out request will remain in effect for the current school year only.**

I hereby exercise my rights under state and federal law and hereby request that the **name, address, email address, telephone number, date and place of birth, information about the student's participation in officially recognized activities and sports, student's weight and height (if a member of an athletic team), student's dates of attendance, grade level, honors and awards, photograph (excluding video records), and major field of study** for _____ (student name), currently a student at _____ (school name), **not** be released without prior written consent.

I understand and acknowledge that this opt-out request will remain in effect for the current school year only. I understand it will exclude my student from publications such as photo/directory information and that my student's information will not be published in any form including district publications such as playbills, yearbooks, websites, newsletters, newspapers, etc.

Signed by (Check one.): eligible student parent/guardian

_____ Signature

_____ Name (Please print.)

_____ Address

_____ City/State/ZIP

For an explanation of the state and federal laws applicable to this form, see Section 9.0 of this code.