SHORELINE PUBLIC SCHOOLS
RELEASE OF STUDENT INFORMATION
("Opt Out" Form)

If you do not want personal information about your student released for any of the purposes listed below, complete this form, sign the appropriate section(s), and **return it to your student's school by October 1**. Student information is defined as the student's name, home address, telephone number, date and place of birth, major field of study, participation in officially recognized school activities and sports, weight and height of members of athletic teams, dates of attendance, degrees and awards received, and most previous school attended. **All denials of release of information are for the current school year only.**

If you do not sign this form, you are granting permission for the release and publication of your student's information, including name, address and phone number for all legal purposes. Regarding any section of this form that is not signed, you are granting permission for the release and/or publication of your student's information for the purposes specified in each section that is unsigned.

_____ _____
Print student's last name Print student's first name

1. DO NOT RELEASE MY STUDENT'S INFORMATION TO EDUCATIONAL INSTITUTIONS AND ORGANIZATIONS (such as Parent Teacher Association, Shoreline Education Association, Colleges etc.) *Sign below if you do NOT want your child's student information released to educational institutions and organizations.*

_____
Parent/Guardian/Adult student signature date

2. DO NOT RELEASE MY STUDENT'S INFORMATION FOR CONTRACTED VENDORS SUPPORTING SENIOR ACTIVITIES (caps and gowns, rings, senior photos, senior spree, etc. The district does NOT release student information to non-contracted vendors.)

_____
Parent/Guardian/Adult student signature date

3. DO NOT RELEASE MY STUDENT'S INFORMATION TO THE U.S. MILITARY: By the federal Solomon Amendment, which took effect on July 1, 2002, high schools are now required to release home contact information for all students to recruiters for the United States Military, unless parents deny the release of this information. *Sign below if you do NOT want your child's student information released to recruiters for the U.S. military.*

_____
Parent/Guardian/Adult student signature date

4. DO NOT RELEASE MY STUDENT'S INFORMATION FOR PTSA STUDENT DIRECTORY

release name? __ Yes ___ No
release home phone number? __ Yes ___ No
release unlisted home number? __ Yes ___ No If yes, unlisted number = _____
release address? __ Yes ___ No

_____ _____
Parent/Guardian/Adult student signature date

SL 6/06