



FERPA Opt-Out Form

Please complete this form and check the appropriate boxes if you **DO NOT** want student directory information released for the purposes described.

Student's Name: _____ **School:** _____ **Grade Level:** _____

Directory Information for School Publications, Images and News Media

Shoreline Public Schools is proud of our students, staff, and many successful programs. From time to time, students may be identified, photographed, and/or videotaped for: **school yearbooks, school newsletters, videos, webpages, social media, or by local news media.**

I **DO NOT** want my student's name, information or image released for the purposes described above.

Directory Information for School PTA/PTSA Organizations

School Parent Teacher Student Associations sometimes request student directory information for PTSA directories and mailings regarding membership, meetings, events and activities.

I **DO NOT** want my student's name or information released for the purposes described above.

Student Directory and Parent/Guardian Contact Information for Educational Institutions and Organizations

Colleges, trade/technical schools, scholarship programs and other educational organizations sometimes request directory and contact information to send information about their programs, opportunities and services. Students enrolled in grades 9-12 or their parents/guardians may opt out of having this information released for this purpose.

I **DO NOT** want my student's name or information released for the purposes described above.

Directory Information for the U.S. Military (High School Only)

Federal law requires high schools to release home contact information for all high school students to military recruiters unless parents/guardians deny the release of this information.

I **DO NOT** want my student's name or information released for the purposes described above.

Directory Information for Contracted Vendors Supporting Senior Activities (High School Only)

Directory information may be shared with vendors contracted by the high schools to support senior activities, such as: caps, gowns, rings, senior photos, senior spree, etc.

I **DO NOT** want my student's name or information released for the purposes described above.

Directory Contact Information for All Purposes

You may also request that your directory contact information (address, phone number and email) be kept confidential and not be published or shared for any purpose.

I **DO NOT** want my contact information (address, phone number and email) released for any purposes.

Parent/Guardian or Adult Student Signature: _____ **Date:** _____