

# Parent/Student Request to Prevent Release of Student Directory Information

School Year: 2007-08

This form is for 9<sup>th</sup> graders and students new to the district.

I, \_\_\_\_\_, request that Township High School District 214 not release the following information regarding my child: name, address, gender, grade level, birth date and place, parents/guardians' names and addresses, academic awards, degrees, honors, information in relation to school sponsored activities, organizations, and athletics, major field of study, dates of attendance in the school/district, and telephone number.

\_\_\_\_\_  
(Student Name)

\_\_\_\_\_  
(Student I.D. #)

I do **not** grant permission to release directory information to the following:

\_\_\_\_\_ Recruiters of the armed forces (name, address and telephone number only)

\_\_\_\_\_ Representatives of institutions of higher education

\_\_\_\_\_ General public (e.g., yearbook company, IHSA, ring companies, photographer for senior portraits, high school booster club)

\_\_\_\_\_  
Signature of Student  
(Must sign if 18 years of age or older)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

*If you do not return this form, the District will assume that you have authorized the release of your student's directory information to military recruiters (name, address, telephone number only), representatives of institutions of higher education, and the general public (e.g., yearbook company, IHSA, ring companies, photographer for senior portraits, high school booster club).*

**PLEASE NOTE:** The decisions you approved on this form will remain in effect throughout your child's enrollment in the school district unless otherwise notified. Please notify the Student Services Department at your student's high school, in writing, if you decide to make any changes to this form.

Revised 5/25/07