

Parent/Guardian Name:

Student's Full Name:

Student's Grade:

School Name:

I, **(Parent/Guardian Name)**, request that Memphis Community Schools **not disclose** the directory information of my child, **(Student's Full Name)**, for the following purposes:

(Check all that apply)

- School Publications (this includes sports programs and awards ceremonies)
 - Media and Public Relations (this includes local media and District Social Media)
 - External Organizations (this includes yearbook and Jostens)
 - School Directories
 - Military Recruiters
 - Institutions of Higher Education
 - Other, Please Specify _____
-

Signature:

Date:

Please return this form to your child's school office or the district office by **September 30, of Current School Year**.

Note: If this form is not returned by the specified date, the district may disclose your child's directory information as described above. Your decision to opt out will remain in effect for the duration of the school year unless otherwise specified.

For any questions or concerns, please contact the Memphis Community Schools District Office at **810-535-8225**.