



# LOS ANGELES UNIFIED SCHOOL DISTRICT PARENT STUDENT HANDBOOK - 2012-2013

## INFORMATION RELEASE FORM

Under Federal and State law, school districts may share student directory information with authorized individuals, organizations and/or officials. Pursuant to California Education Code section 49073, LAUSD has identified the categories of information listed below as directory information that may be released to the officials and organizations named below. Parents of students 17 years or younger and adult students 18 years or older may request the school principal limit the release of directory information or not release directory information at all. The request to withhold the student directory information is applicable only to the current school year.

**PLEASE READ AND COMPLETE THE INFORMATION RELEASE FROM BELOW AND RETURN IT TO YOUR SCHOOL PRINCIPAL. UNLESS THIS FORM IS RETURNED, YOUR STUDENT'S INFORMATION MAY BE RELEASED AS INDICATED.**

COMPLETE, SIGN AND RETURN THIS PORTION TO YOUR CHILD'S SCHOOL



### LOS ANGELES UNIFIED SCHOOL DISTRICT - 2012-2013 PARENT STUDENT HANDBOOK INFORMATION RELEASE FORM

SCHOOL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

STUDENT NAME: (Please Print)	Date of Birth:	Grade:
Address:	City:	Zip Code:
Telephone Number:	Record Room:	

### STUDENT DIRECTORY INFORMATION

☐ 1. I **do not** wish to have **any** directory information released to **any** individual or organization.

OR

☐ 2. I request to withhold the directory information according to the box(es) I check below:

	DO NOT RELEASE
PTA	
HEALTH DEPT.	
ELECTED OFFICIALS	
DCFS	
DEPT. OF MENTAL HEALTH	
PROBATION DEPT.	

	DO NOT RELEASE
1. Name	
2. Address	
3. Telephone Number	
4. Date of Birth	
5. Dates of Attendance	
6. Previous School(s)	

3. For 11<sup>th</sup> and 12<sup>th</sup> Grades students only: I do not wish to release the name, address, and telephone number of the student named above to the agency or agencies I check below.

\_\_\_\_\_ United States Armed Forces

\_\_\_\_\_ Colleges, Universities or Other

\_\_\_\_\_ (Military) Recruiting Agencies

\_\_\_\_\_ Institutions of Higher Education

4. National Student Clearinghouse.

\_\_\_\_\_  
Name Date Name of Last School Attended

### MEDIA RELEASE OF INFORMATION

☐ My child may be interviewed, photographed, or filmed by members of the media.

☐ My child may not be interviewed, photographed, or filmed by members of the media.

\_\_\_\_\_  
Signature of Parent/Guardian (if student is under 18)

\_\_\_\_\_  
Signature of Student (if student is 18 or older)