



East Tallahatchie School District



Mr. Marvell Hudson, Superintendent
411 East Chestnut Street
Charleston, MS 38921

662-647-5524 phone • 662-647-3720 fax

Parental Opt-out Information For Parents of all Ninth through Twelfth Grade Students

Dear Parent:

Federal law requires each Local Educational Agency (LEA), upon request of a military recruiter or an institution of higher education, access to names, addresses, and telephone numbers of high school students. A parent may submit a request in writing to the LEA that such student information not be released without prior written consent of the parent.

If you wish to provide written consent prior to the release of this information you may use the below example and return it to your child's school. However, please be aware that if you choose not to return the form at this time, you may do so at any time during your child's school career. The request will be honored and it will be saved as a student record.

Sincerely,

Eric Rice
Principal

PARENTAL REQUEST TO OPT-OUT OF SCHOOL DIRECTORY

Student's First Name

Student's Last Name

Student's Official Class/Grade: _____

Name of School: _____

I am requesting that my child's name, address, and telephone number NOT be included in the school directory.

Parent's Signature

Parent's Printed Name

Date

