



DIRECTORY AND MILITARY INFORMATION OPT OUT

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Please complete and sign below only if you, or your student if they are 18 years of age or older, would like the student's name, address, telephone listing and/or other directory information held from release as directory information and recruitment purposes.

Student Name:	
School Name:	

If student is younger than 18:

- I am the parent or legal guardian of the student listed above who is under age 18.

If student is 18 or older:

- I am the student listed above and I am age 18 or over.

Please check appropriate box(es):

- Military Recruiters: I would like my student's name, address, and telephone information withheld from release to military recruiters without my prior written consent.
- Institutions of Higher Education: I would like my student's name, address, and telephone information withheld from release to institutions of higher education without my prior written consent.
- Directory Information: I would like my student's directory information withheld from release without my prior written consent.

Name of Legal Guardian or Student aged 18 or over: _____

Signature: (electronically typed or signed) _____

Date: _____