

Lake Havasu Unified School District Student Directory Opt-Out Form

This form must be completed and returned to the school your child attends to be **excluded** from having his/her directory information released.

I request to **exclude** the release of directory information (name, address, phone number, participation in school activities and sports, honors and awards, height and weight of athletic team members, dates of attendance, school, grade, photographs, enrollment status, major field of study, date and place of birth, email, most recently attended agency or institution, and other images) about my student. I understand this means **exclusion**:

- from school documents that typically are made public, such as:
 - yearbooks,
 - alumni directories,
 - graduation programs,
 - honor roll and other recognition lists, and
 - sports activity and theatrical programs;
- of my student's directory information from other documents relating to school-related organizations and activities and from county agencies or any other third parties requesting information;
- from any Lake Havasu Unified School District videotape, motion picture, audio recording, television, website and still photography productions;
- Online educational services.

School Name (Please Print): _____

Student's Name (Please Print): _____

Parent's Signature: _____ Date: _____

Student Signature if over 18: _____ Date: _____

Military Opt-Out

I would like to request to **exclude** the release of directory information (name, address, phone number) about my student to the U.S. Armed Forces Recruiting Officials.

School Name (Please Print): _____

Student's Name (Please Print): _____

Parent's Signature: _____ Date: _____

Student Signature if over 18: _____ Date: _____

Public Media Opt-Out

I would like to request to **exclude** my student from being published in public media formats such as newspaper, audio/video, live broadcast, internet, webpages, social media, etc.

School Name (Please Print): _____

Student's Name (Please Print): _____

Parent's Signature: _____ Date: _____

Student Signature if over 18: _____ Date: _____