FERPA Parent, Guardian, or Legal or Actual Custodian Notification Form: Competent Private Instruction

(Sent to Parent, Guardian, or Legal or Actual Custodian by the School District)

Dear Parent/Guardian/Legal or Actual Custodian:

Enclosed/attached is an annual notice of the rights you and your child have with respect to your child's education records.

This notice is being provided to you because Form A (the Report of Competent Private Instruction), which you are required to file annually, is a public document and constitutes an educational record.

Of course, not all of the information on Form A is public information. The information on Form A that is confidential and will not be released without proper consent or statutory authorization includes (in the order in which it appears on our most recent version of that form) the following:

- a. immunization information,
- b. special education status,
- c. instructional program information,
- d. number of days under CPI,
- e. all information about a licensed teacher who is providing or supervising the instruction, and
- f. all assessment/portfolio information.

Unless you notify us to the contrary, our district will release, upon request, the following "directory information" about your child:

Student's Name
Address
Telephone Listing
Grade Level
Photograph

Whether student is dually enrolled or enrolled in home school assistance program Extracurricular activities (if applicable)

If you do not want all or some of the above information released, provide written instructions to:

Mary Jane Stites
PO Box 680
Grimes, IA 50111
OR
maryjane.stites@dcgschools.com

If you have any questions about this notice, call the district office at 515-992-3866.

DALLAS CENTER-GRIMES COMMUNITY SCHOOL 2405 W 1st St, PO Box 680

Grimes, Iowa 50111

Telephone: 515-992-3866 Fax: 515-992-3079

Student Release of Information Opt-Out Form (To Prevent School Officials from Releasing Student's Personal Information)

| Student Name: | | Date: |
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| Please read carefully, make above. | appropriate selections, and return | to Central Office at the address listed |
| I request that the above stud | lent's directory information | |
| | not be released to military recrui | ters |
| | no release of information | |
| Signature of parent or guard | ian: | Date: |
| I am 18 years old and reque individual/groups. | st that my directory information no | ot be released to the above checked |
| Signature of student: | | Date: |
| I further request Class to meet with military re | that the above named student no ecruiters. | t be removed from an academic |
| Signature of parent or guard | ian: | Date: |