

All parts of this form must be completed in full, signed and returned to School by August 31, 2009.

Note: Failure to return this form gives permission to release all directory information. Permission is granted for all sections unless the "I do not give" is checked.

STUDENT NAME:		STUDENT ID
	(PLEASE PRINT)	(PLEASE PRINT)
PART 1: Direc	tory/Vendor Release Informat	tion
DISCLAIMER: A	Third party vendor includes any organi	ization or person not affiliated with LISD.
who follows the proced the directory information disclose directory information complete and return the following information a Student Photograph, V	dures for requesting the information un on about the student. If you do not wa mation from your child's education rec his form by August 31, 2009. Lewisville as directory information: Student Name Veight-Height-Number if on Athletic Te	ctory information and will be released to anyone aless the parent/guardian objects to the release of ant Lewisville Independent School District to cords without your prior written consent, you must be Independent School District has designated the e, Address, Phone Number, Date/Place of Birth, eam, Dates of Attendance, Awards received in in Officially Recognized Activities/Sports.
		hild's information from being included in school nformation to be published and released (i.e., athleti
☐ I do not give	my permission for my child's informat	tion to be distributed and published within LISD.*
	in school yearbooks, class pictures	vent your child's information from being included and in LISD printed directory information to be c programs and graduation programs).
☐ I do not give	my permission for my child's inform Party Vendors (any organization o	nation to be distributed and published by Third or person not affiliated with LISD).
PART 2:		
Note: Federal Lav	er education on request unless the	ertain information to military recruiters of e parent has previously objected to such
☐ I do not give	my permission for my child's information to	be released to Armed Services Recruiters .

(PLEASE TURN OVER AND COMPLETE)

PART 3: Release of Student Information Via Email

☐ I do not give

permission for the release of student record information of my child (listed above), to be provided to me electronically via email by school personnel. The specific information and/or records requested may include any pertinent concerns, including student conduct, discipline, attendance, academic performance and behavior and response to parental concerns and requests for information.

I understand that the transmittal of this material may not be available by secure methods and may be capable of observation, interception, or monitoring by others. Because of the non-secure nature of electronic communication, teachers will not communicate with you via e-mail or fax unless you have granted your permission for such communication to occur. Further, I understand the District *cannot guarantee* that only the e-mail address provided will receive the records. I request that the student record information above be sent to:

Note: Teachers WILL NOT be able to specifically communicate with you via email or fax regarding your child's school progress without this form. This release assumes that student records will be sent via e-mail or FAX.

(Please print CLEARLY)

PART 4: Photo/Video and LISD Web Site Consent Form (Please read carefully)

Occasions arise during the school year for students to be photographed by professional photographers or teachers/staff for learning and/or teaching opportunities. There may also be opportunities for student photos or projects to be published on the World Wide Web as part of school classes and activities. No last name, home address or telephone numbers should appear on the web. A copy of all such publishing will be printed and provided on request. Examples of such activities include:

- ☐ I do not give my permission for my child's information to be included in LISD activities.
 - News Stories
 - Bulletin Boards
 - Special Events
- School-made Books for classroom or library
- Video Reports for Class
- Teacher developed web pages
- Class Plays

	y my signature below that I have read and dis read and completed Parts 1 – 4 of this docum	cussed the campus Student Handbook with my ent. My wishes have been indicated on each
Name	(Parent or Guardian Name – Please Print)	Date:
	(Parent of Guardian Name – Please Pfint)	
Home Address:		Home Phone:
City	Zip:	
		Parent or Guardian Signature
Campus Stud	lent Handbook Signature	
Student's Acknowle	dgement of Reading Campus Student Handbook:	
		Student Signature