

Please Respond
in English

English
Notice to Obtain Written Parental Consent
for Military or College Recruiters

**Notice to Obtain Written Parental Consent for
Military or College Recruiters**

Name of Student: _____ Date: _____
(mm/dd/yyyy)

Name of Parent: _____ School: _____

Dear Parent, Guardian, or Secondary Students:

The district has received a request by a military recruiter or college for secondary school student information. You requested to be informed if such a request is made so that you may provide us with prior written consent to release such information.

The following group(s) have requested secondary student's name, address and telephone:

- Military Recruiter
optional: _____ (branch of military service)
- College, University or an Institution of Higher Learning.
optional: _____ (name of college, university, etc.)

Please complete the section below to provide us with *written consent* which gives us approval to release this information or your decision to deny release of this information. Please return this form to your child's school as soon as possible.

Sincerely,

**Parent or Guardian: Please complete this section and return the entire form to your child's school.
Use a separate form for each child.**

I am aware the district must provide student names, addresses and telephone listings access to military recruiters, colleges, or universities. I am aware the district will provide this information upon request, unless I require that such information not be given to the following groups *without prior written parental consent*:

Military Recruiters (please check one):

- Do not release my secondary student's information to military recruiters at any time.
- Do not release my secondary student's information to military recruiters until you have first obtained my *prior written parental consent* before doing so.

Colleges, Universities, or Institutions of Higher Learning (please check one):

- Do not release my secondary student's information to colleges, universities or other institutions of higher learning at any time.
- Do not release my secondary student's information to colleges, universities or institutions of higher learning until you have first obtained my *prior written parental consent* before doing so.

Name of Student: _____ Name of Parent or Guardian: _____

Parent Signature: _____ Date: _____
(mm/dd/yyyy)

Adult Student Signature: _____ Date: _____
(mm/dd/yyyy)

OFFICE USE ONLY			
Student ID #	Date Distributed	Date Received	