

FERPA DIRECTORY INFORMATION OPT-OUT FORM

Student Name:	Pueblo/Tribe:
Parent/Guardian Name:	
NOTICE OF DIRECTORY INFORMATION	
In accordance with the Federal Educational Rights and Privacy Act (FERPA), a student's education records are maintained a confidential by the Santa Fe Indian School. The law requires that Santa Fe Indian School not disclose personally identifiable information from a student's educational records to the public without parent/guardian written consent, except to thos having a legal right to the information including federal auditors, those having oversight responsibilities, circumstance regarding health and safety, emergencies or similar entities. However, Santa Fe Indian School is allowed to release "Director Information" without obtaining the prior consent of the parent. Directory Information is information that is generally no considered harmful or an invasion of privacy if released. It may be used for the following school purposes: the annual yearbook, honor roll or other recognition lists, promotion and/or graduation programs, and program or sports activity rosters. Santa Fe Indian School considers Directory Information to be those items of information listed below in this form. If you DO NOT want Santa Fe Indian School to release your child's directory information without your prior consent, you may choose to "Opt-Out" of this FERPA exception by signing the form below. Directory Information of a student who has opted out will remain flagged until the parent/guardian provides a written request the flag be removed to the Office of Admissions.	
TO: The Office of Admissions	
I request the withholding of the following personally identifiable information that the Santa Fe Indian School has identified as Directory Information under FERPA. I understand that upon submission of this form, the information checked cannot be released to third parties without my written consent or unless Santa Fe Indian School is required by law or permitted under FERPA to release such information without my written consent.	
CHECK ALL BOXES THAT APPLY	
ALL INFORMATION IDENTIF	IED BELOW
Student's Name Photograph Awards & Honors Received Participation rosters in officially recognized a	Address Grade Level Dates of Attendance activities and sports
I verify that I am the parent or legal guardian or eligible student (at least 18 years of age)	
Signature:	Date:

Home of the Braves
Make Good Choices