

Cambridge Central School Opt Out Request

(Grades K-12) Date:

I/We understand that in exercising our right to "opt out" of disclosure of directory information, the school district cannot disclose our child's name, address or telephone number, information about their participation in officially recognized activities and sports, weight and height related to participation in athletic teams, dates of attendance, and degrees, honors and awards received.

I/We understand that, pursuant to this request, directory information will not be released without our written consent to colleges, universities, or to prospective employers.

Print Name of Parent(s)/ Legal Guardian(s)

Signature of Parent(s)/Legal Guardian(s)
*If Student is over 18 years of age

Student's Name/Signature*

You may submit this form in person, by mail, or via facsimile to 518-677-3889.