Stephanie Leitz, Principal Wahkiakum High School

Printed Parent's Name

360.795.3271 Fax: 360.795.0545 **Brent Freeman, Superintendent** 

Bernice Sundby, Business Manager 360.795.3971 Fax: 360.795.0545

Nikki Reese, Principal

Julius A. Wendt Elementary School John C. Thomas Middle School 360.795.3261 Fax: 360.795.3205

Date

## Wahkiakum School District 200

500 S. 3rd B398 Cathlamet, WA 98612

To: Wahkiakum High School Students and their Parents -

Washington State law (RCW 42.56.230) provides that personal information in any files maintained for students in public school is exempt from public inspection and copying. This means that Wahkiakum School District 200 ("District") does not release personal information of students to other entities, such as colleges/technical schools, the military, those granting scholarships, and companies that provide student photos and class rings, graduation materials, etc. Please note that law enforcement agencies and Child Protective Services are not included in this restriction.

Personal information includes, but is not limited to, addresses, telephone numbers, personal electronic mail addresses, social security numbers, emergency contact info, and date of birth.

The District understands that it could be advantageous to release student names, addresses, telephone numbers and dates of birth to colleges, the military, those granting scholarships, and companies that provide services such as photography and graduation materials. In order for the District to release this information, the District must have written permission from the student and his/her parent or guardian (parent signature is not required if the student is 18 years of age or older.)

Signing this document is strictly voluntary. If signed, this authorization will remain in effect for the remainder of the student's high school education unless it is withdrawn in writing prior to that time.

If you are <u>not</u> interested in having such information released, you need do nothing further. If you <u>are</u> willing to have such information released, please complete the following and return it to the high school office.

## **AUTHORIZATION TO RELEASE INFORMATION**

telephone number and date of birth	Wahkiakum School District to release my so to colleges/technical schools, the military ding photography and graduation services.	, those granting
Printed Student's Name	Student's Signature	Date
Printed Parent's Name	Parent's Signature	Date

Parent's Signature