

North Cape School District

Home of the Vikings

11926 West Highway K
Franksville, WI 53126
Phone: 262-835-4069 or 262-534-3894
Fax: 262-835-2311
www.northcape.K12.wi.us

DIRECTORY DATA OPT-OUT FORM

Wisconsin law allows school districts to provide “directory data” information to anyone that requests it, unless the family has signed a form telling the school not to release any or all of the information. The areas listed below are considered “directory data” and may be released without parent consent. Parents that sign the form below will not have information released. **Please be aware that by signing the form, your student’s information that is checked cannot appear in yearbooks, sports guides, newsletters, etc.**

Please complete the form below if you wish to withhold any directory data, and return it within 14 days.

REQUEST TO WITHHOLD DIRECTORY DATA (DO NOT GIVE OUT OR PUBLISH)

Student’s Name: _____
Last First Grade

I do not want the North Cape School District to disclose “directory data” as checked below without prior consent from parent, legal guardian, guardian ad litem or eligible student (18 or older). This includes information that may be given to the military for recruitment purposes per Federal law.

- _____ Student Name
- _____ Month and day of Birth
- _____ Dates of Attendance (not including daily attendance records)
- _____ Grade Level in School
- _____ Participation in Activities and Sports
- _____ Weight and Height (Athletic Team Members Only)
- _____ School Most Recently/Previously Attended
- _____ Recorded Images of the student that are not being maintained by the District for a separate purpose as a behavioral record
- _____ Awards, Honors and recognitions received by the Student

_____ ***I wish to opt out of the disclosure of my child’s student directory data in response to all third-party (i.e., non-school) requests. However, my child’s directory data may be used and disclosed in connection with school-sponsored activities and school-sponsored publications and communications (such as yearbooks, printed activity programs, newsletters, etc.).***

Signature: _____
Parent/Legal Guardian/Guardian ad Litem/Eligible Student (18 or older) Date

Revised 3/2016

Mr. John C. Lehnen, Superintendent/Principal