

Mill Valley School District Release of Information Form

The Mill Valley School District recognizes the importance of maintaining the confidentiality of student information. Release of this information is only done in accordance with District policy, which adheres to federal and state law.

The District releases limited information to our partner non-profit organizations and groups, as authorized by our policy, to inform parents and the community about local educational issues. This information includes student name, parent/guardian name(s), address, telephone, parent email address, school, grade, and teacher, and would be used, among other things, to provide a District Directory.

In addition, a student's first name, photo, video and/or work may be used in District communications and publications, approved parent organization publications, or in approved media publications. Some of these publications include, but are not limited to: District, School, and Kiddo! websites, and school yearbooks; District, School, PTA, or Kiddo! communications that include the District and School newsletters, ParentSquare, and official District social media accounts. The purposes of these communications and publications, which may be in print, electronic, and/or video formats, are to inform the school community, provide opportunities to learn more about our district and schools, and showcase their achievements. The Superintendent also uses the list of approved students for release of information to identify students for special appearances at district events, such as the District State of the Students Address, and in district features. Parents will receive invitations for these events.

Per state and federal guidelines, the District only releases information that is not generally considered harmful or an invasion of privacy if disclosed. By law, parents/guardians have the right to refuse the release of certain designated information by informing the District on this form.

By signing below, I authorize the District to release student information as described above. I recognize that this authorization will remain in force during the enrollment of my child and can only be changed through a resubmission of this form. I understand that I will be reminded annually of my right to modify my Release of Information permissions.

I agree I disagree I agree, with the exceptions indicated below.

Exceptions:

No address No phone number No email No photo/video Other: _____

Parent/Guardian Signature

Date

Parent/Guardian Name (Print)

Student Name (Print)
