**DIRECTORY INFORMATION**

***Eligible Student Request Not to Disclose***

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am at least eighteen (18) years old and a student in the Newark City School District. I understand that the District considers the following information “directory information”:

* Name;
* Address;
* Telephone listing;
* Date and place of birth;
* Major field of study;
* Participation in officially recognized activities and sports;
* Weight and height for members of athletic teams;
* Dates of attendance; and
* Degrees and awards received.

I request that my directory information **not be disclosed**.

NAME:

ADDRESS:

PHONE NUMBER:

SIGNATURE:

DATE: