## Acknowledgment of Electronic Distribution of Student Code of Conduct

My child and I have been offered the option to receive a paper copy of or to electronically access at www.whitefaceschool.net the Whiteface CISD Student Code of Conduct for the 2020–2021 school year.

I accept responsibility for accessing the Student Code of Conduct by visiting the web address listed above.

I understand that if I wish to receive a paper copy of the Student Code of Conduct, I must request a copy from the school's administrative assistant in the administration office.

I understand that the Student Code of Conduct contains information that my child and I may need during the school year. I also understand that all students will be held accountable for their behavior and will be subject to the disciplinary consequences outlined in the Student Code of Conduct. If I have any questions regarding this Code of Conduct, I will direct those questions to the principal at (806) 287-1104 or email at cmendez@whitefaceschool.net

Student's name (print):		
Student's signature:		
Parent's name (print): _		
Parent's signature:		
Date:		

### **Acknowledgment of Electronic Distribution of Student Handbook**

My child and I have been offered the option to receive a paper copy of or to electronically access at www.whitefaceschool.net the Whiteface CISD Student Handbook for the 2020-2021 school year.

I accept responsibility for accessing the Student Handbook by visiting the web address listed above.

I understand that if I wish to receive a paper copy of the Student Handbook, I must request a copy from the school's administrative assistant in the administration office.

I understand that the Student Handbook contains information that my child and I may need during the school year. I also understand that all students will be held accountable for their behavior and will be subject to the disciplinary consequences outlined in the Student Code of Conduct. If I have any questions regarding this handbook, I will direct those questions to the principal at (806) 287-1104 or email at cmendez@whitefaceschool.net

Student's name (print):	
Student's signature:	
Student 3 Signature.	
Parent's signature:	
Date:	

## Notice Regarding Directory Information and Parent's Response Regarding Release of Student Information

Dear Parent:

State law requires the district to give parents the following information:

Certain information about district students is considered directory information and will be released to anyone who follows the procedures for requesting the information unless the parent or guardian objects to the release of the directory information about the student. If you do not want Whiteface CISD to disclose directory information from your child's education records without your prior, written consent, you must notify the district in writing within ten school days of your child's first day of instruction for this school year.

This means that the district must give certain personal information (called "directory information") about your child to any person who requests it, unless you have told the district in writing not to do so. The district is providing you the following form so you can communicate your wishes about these issues. [For more information, see **Objecting to the Release of Directory Information** in the Whiteface CISD's Student Handbook.]

Whiteface CISD has designated the following information as directory information:

- 1. Items for use only for school-sponsored purposes; and
- 2. Items for all other purposes.

**School Sponsored Purposes** 

For the following school-sponsored purposes-all District publications and announcements-directory information shall include student name; Address; telephone listing; electronic mail address; photograph; date and place of birth; major field of study; degrees, honors and awards received; dates of attendance; grade level; most recent educational institution attended; participation in officially recognized activities and sports; and weight and height of members of athletic teams. For all other purposes, directory information shall include student name and grade.

# Parent, please circle one of the choices below: I, parent of \_\_\_\_\_\_\_ (student's name), [do give] [do not give] the

., parent or	(stage it s italite) [as 8:15] [as its 8:15] the
district permission to release the information in	n this list in response to a request.
Parent's signature:	
Date:	

**Note:** If this form is not returned within the time frame specified above, the district will assume that permission has been granted for the release of this information.

## Parent's Objection to the Release of Student Information to Military Recruiters and Institutions of Higher Education

### (Applicable to secondary grade levels only)

#### Dear Parent:

Federal law requires that the district, upon request, release to military recruiters and institutions of higher education the name, address, and telephone number of secondary school students enrolled in the district—unless a student's parent or eligible student objects in writing. [See Objecting to the Release of Student Information to Military Recruiters and Institutions of Higher Education on page 15 for more information.]

· ·	this form to the school only if you do not want your child's cruiter or an institution of higher education without your
	(student's name), request that the district not district not district not district not consent.
Parent's signature:	
Date:	
<b>Note:</b> If this form is not returned, the	e district will assume that permission has been granted for

**Note:** If this form is not returned, the district will assume that permission has been granted for the release of this information.