



HOME SCHOOL Release of Information

Students' Full Name (Please Print)	Birthdate

Parent/Guardian Full Name (please print) _____

Parent/Guardian Current Address _____

I **do not** want Lane Education Service District to release “directory information” to the public upon request. I understand that “directory information” includes student name, student electronic address, and the most recent previous school or program attended. (Ref: Lane ESD Policy JOA)

I **do not** want Lane Education Service District to release my secondary student’s information to military recruiters and/or institutions of higher education. I understand that the information that may be released to these individuals/institutions includes student name, address, and telephone listing. (Ref: No Child Left Behind Law [Section 9528], National Defense Authorization Act [P.L. No. 107-107])

Parent/Guardian Name _____ Date _____

Return form to: Lane Education Service District
Attn: MaryAnn Neves
1200 Highway 99 N
Eugene, OR 97402

Email completed PDF to: homeschool@lesd.k12.or.us