



STUDENT CONFIRMATION AND CONSENT FORM

You must complete this form each year you are enrolled at Metro Tech

POLICIES AND PROCEDURES

I have been given and I agree to abide by the policies, procedures, and statements presented in the Student Handbook.

IMAGE RELEASE

I DO or I DO NOT grant Metro Tech permission to use any photographic, video or audio image of me by the school district to promote its services and programs.

REQUEST TO WITHHOLD DIRECTORY INFORMATION

The following is considered directory information at Metro Tech—student name, career major, date of attendance, certificates received, and enrollment status (full-time/part-time). Our policy states that we may disclose this information to individuals who request it.

Under the provisions of the Family Education Rights and Privacy Act of 1974, you have the right to withhold disclosure of such directory information. Please consider carefully the consequences of any decision to withhold directory information. If you choose to do so, any request for such information from other parties, including prospective employers, family members, and friends will be refused, unless you provide specific written consent to release the information in the future.

Metro Tech will honor your request to withhold directory information, but cannot assume responsibility to contact you for future permission to release such information. Metro Tech assumes no liability as a result of honoring your instructions that such information be withheld.

I DO or I DO NOT request that Metro Tech withhold release of any directory information from my academic records.

If you are under the age of 18, your parent or guardian must sign.

Student's Full Name (please print)

Parent's or Guardian's Name (please print)

Student's Signature

Parent's or Guardian's Signature

Date

Date

After completing, please return form to your teacher.