Request for Student Directory Information

In compliance with Wisconsin Statute 118.125(1) (b), the Racine Unified School District designates certain specific identifiable information contained in a student's education record as "Directory Information." The District must disclose that information without prior written consent to anyone who requests it. Some students may be excluded, as parents have the right to withhold their child’s name from the Directory Information.

Information provided will be for public school students only. Directory Information provided may include: student name, mailing address, telephone number, birth date, class year and present school.

Please indicate the type of information and format you are requesting.

A. Materials needed
   _____ This request is for a student list on a CD or e-mailed as an attachment (circle one)
   E-mail address _____________________________________________________________ (data is in Excel Spreadsheet format)

B. Schools to be included
   _____ All Schools
   _____ Specific School(s)  -  Please list: _______________________________________________________________________________

C. Grade level/class year
   _____ All elementary students (K-5)
   _____ All middle school students (6-8)
   _____ All senior high students (9-12)
   _____ All grade levels
   _____ Specific class years  -  Please list:

D. Sort pattern/arrangement of data
   _____ Alphabetical
   _____ Zip/alphabetical
   _____ Class year/alphabetical
   _____ School/alphabetical

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Requested By
Name ________________________________  Signature ________________________________
Organization ______________________________________________  Phone _______________________
Address ______________________________________________  City __________________________  State/Zip _________________
Date __________________________  Purpose of request ______________________________________
For military recruiters only: Include student email addresses in my request. ____ Yes  ____ No

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For Office Use Only
Request Approved _____  Authorization to produce ______________________________ Date ________________
Request Denied_____  Reason for denial ______________________________________________
Date Completed ______________________  Received By __________________________ Date ____________