

PRIMARY CONTACTS (Must have at least one primary contact; automatically receives school mail/student records)

Parent/Guardian Name:
 Relationship to Student:
 Lives with student: Full-time Part-time N/A
 Legal Guardian: Yes No
 Has custody of student? Yes No
 Mailing Address: Check here if same as student

Parent/Guardian Name:
 Relationship to Student:
 Lives with student: Full-time Part-time N/A
 Legal Guardian: Yes No
 Has custody of student? Yes No
 Mailing Address: Check here if same as student

Mailing City, ST, Zip:
 Home Phone: Cell Phone:
 Email:
 Employer: Work Phone: ext:
 Best Means of Contact: Home Cell Work

Mailing City, ST, Zip:
 Home Phone: Cell Phone:
 Email:
 Employer: Work Phone: ext:
 Best Means of Contact: Home Cell Work

SECONDARY CONTACTS (Must be legal guardian to receive school mail/student records)

Parent/Guardian Name:
 Relationship to Student:
 Lives with student: Full-time Part-time N/A
 Legal Guardian: Yes No
 Has custody of student? Yes No
 Receive school mail? Yes No
 Mailing Address: Check here if same as student

Parent/Guardian Name:
 Relationship to Student:
 Lives with student: Full-time Part-time N/A
 Legal Guardian: Yes No
 Has custody of student? Yes No
 Receive school mail? Yes No
 Mailing Address: Check here if same as student

Mailing City, ST, Zip:
 Home Phone: Cell Phone:
 Email:
 Employer: Work Phone: ext:
 Best Means of Contact: Home Cell Work

Mailing City, ST, Zip:
 Home Phone: Cell Phone:
 Email:
 Employer: Work Phone: ext:
 Best Means of Contact: Home Cell Work

Legal Information: Is anyone forbidden access to the student? You must attach documentation, such as a court order or restraining order, to be honored

ALTERNATE EMERGENCY CONTACTS

List up to three people OTHER THAN primary or secondary contacts to be called if above contacts are not available

Name & Relationship	Phone 1/Type (home, cell)	Phone 2/Type	Phone 3/Type
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SIGNATURE

I certify that this information is true and correct. If any of the information contained on this form should change during the school year, I understand that it is my responsibility to inform Craftsbury Schools immediately.

Signed: _____

Date: _____

Orleans Southwest Supervisory Union
Craftsbury Schools

AUTOMATED NOTIFICATION SYSTEM

OSSU uses an automated notification system called "School Messenger" to communicate school-related information by telephone and email, including:

School- or OSSU-wide Emergency Messages: occurrences that impact the health and safety of students and staff. These may include, but are not limited to: school closings or delays due to inclement weather, natural disasters, or other occurrences (e.g., lockdowns, building evacuations or police activity on or around campus). Visit www.ossu.org for more information on emergency notification procedures.

School-based Important Messages: important information that does not pertain to the entire supervisory union, including but not limited to school-, class-, bus-, or grade-level messages that need to go out prior to when the school opens or after school dismisses (e.g., principals sending messages about a delayed bus from a field trip or sporting event).

Events & Announcements: principals or the Superintendent may communicate upcoming opportunities or events of educational value for students, parents/guardians, or staff (e.g., performances, staff meetings, testing, open houses, back-to-school events). The system will not be used to disseminate information on behalf of political candidates, political parties, religious organizations, or commercial events or products.

We recommend that parents/guardians include at least one phone number and email address for emergency and important school-based notifications. Because we are aware that using the system for the dissemination of non-essential messages could be irritating to some, parents/guardians have the choice to sign up for additional events and announcement notifications.

In order to receive notifications quickly and efficiently, parents/guardians can indicate the best phone numbers and email addresses to be included in the different types of notifications. Please carefully review the information listed below and make appropriate changes. Please allow up to three weeks for your information to be updated after it is returned to the school.

OSSU AUTOMATED NOTIFICATION CONTACTS

EMERGENCY AND IMPORTANT SCHOOL NOTIFICATIONS

Please enter up to three phone numbers and email addresses to be used for emergency and important school notifications sent between 6:00 AM and 4:00 PM and 4:01 PM to 9:00 PM as well as preferred email addresses.

Notification Hours	Contact 1	Contact 2	Contact 3
Phone 6:00 am - 4:00 pm			
Phone 4:01 - 9:00 pm			
Email (any time)			

EVENTS & ANNOUNCEMENTS

Please enter up to three phone numbers and email addresses to be used for Events & Announcement Notifications. If you do not wish to receive these types of notifications, please leave this section blank.

Type	Contact 1	Contact 2	Contact 3
Phone			
Email			

TEXT MESSAGES

Are you interested in receiving text messages as part of the notification system once it becomes available?

Yes No

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

Orleans Southwest Supervisory Union
Craftsbury Schools

USE OF STUDENT DIRECTORY INFORMATION AND PHOTOS ANNUAL OPT-OUT FORM

ANNUAL NOTIFICATION

The Family Educational Rights and Privacy Act (FERPA), a Federal law, requires that Craftsbury Schools, with certain exceptions, must obtain your written consent prior to the disclosure of personally identifiable information from your child's education records. However, Craftsbury Schools may disclose appropriately designated "directory information" without written consent, unless you have advised the school not to release this information.

Craftsbury Schools has designated the following information as directory information:

- Student's name
- Date of birth
- Address
- Electronic mail address
- Telephone number
- Photograph
- Major field of study
- Participation in officially recognized activities and sports
- Dates of attendance
- The most recent educational agency or institution attended
- Weight and height of members of athletic teams
- Degrees, honors, and awards received

Parents/Guardians have the right to choose whether your child's information is released or not. Please check the appropriate boxes below and return this form to Craftsbury Schools before **October 1st**.

Parents, guardians, or eligible students who do not check a box, or who do not return this form, give their implied consent for release of directory information, consent to use of student photographs (grades K-12), consent to release directory information to the military (grades 9-12 only), and consent to release directory information to institutions of higher education (grades 9 – 12).

Please return this form directly to Craftsbury Schools either in person or by U.S. mail. If you have more than one child in school, this opt out form must be completed for each child.

PLEASE MARK AN "X" NEXT TO EACH APPLICABLE STATEMENT BELOW:

ALL STUDENTS PK-12

I DO NOT consent to the release of directory information about the student named below for use in publications, such as newspapers, rosters for sports or other media, or honor roll, except as authorized by law.

I DO NOT consent to the release of photographs/video of the student named below for the use in publications, such as newspapers, yearbooks, websites, sports programs, concert programs, theatrical programs, or articles.

ALL STUDENTS IN GRADES 9 - 12

I DO NOT consent to the release of directory information to the military about the student named below.

I DO NOT consent to the release of directory information about the student named below to institutions of higher education that request it

Student's Full Legal Name (Print): _____

Student's Date of Birth: _____

Student's School: Craftsbury Schools

Student's Grade: _____

Parent/Guardian Full Legal Name (Print):: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____