Arlington Memorial
Middle / High School

Please sign and return this form to the Guidance Office as soon as possible. Thank you.

ADDITIONAL PARENTAL RIGHTS

Part A of the ***Improving America's Schools Act*** of 1994, *Reauthorization of the Elementary and Secondary Education Act* of 1965 gives parents the right to request information regarding the professional qualifications of their child's classroom teachers. If requested, the information should include (a) if the teacher has met the state licensing criteria for the grade levels and subjects taught, (b) whether the teacher is teaching under a licensure waiver, (c) the teacher's degree major, and (d) whether your child is provided any services by paraprofessionals, and if so, their qualifications.

According to the ***Consolidated Federal Programs Application LEA 2004***, parents upon request, have the right to inspect any survey created by a third party (a survey funded by a non-U.S. Department of Education source). If the third party survey involves political affiliations, mental or psychological problems, sex behavior and attitudes, illegal or anti-social behavior, critical appraisals of family members, income, or privileged relationships such as doctors or lawyers, parents may opt their children out of its administration.

PERMISSION FOR DISCLOSURE OF STUDENT INFORMATION 2017-2018

The Journalism class will again publish *The Eagles' Nest* school newspaper. This publication includes news about what is happening in our school including honor roll, athletic photos, etc.; therefore, students' names, photos and/or quotes can appear in publication. In addition, the AMHS Communications Office sends press releases announcing student achievements to local media outlets. Please sign below to indicate if you will allow information regarding your student to be released.

☐ **I give permission for my student's name to appear in these publications.**

_____ _____
Parent/Guardian Signature Date

☐ **I do NOT want my student's name to appear in these publications.**

_____ _____
Parent/Guardian Signature Date

Name of student(s): (please print clearly)
_____ Grade:____
_____ Grade:____
_____ Grade:____
_____ Grade:____