Reach Each Child

Pulaski County Public Schools

202 N. Washington Avenue, Pulaski, Virginia 24301

Office of the Superintendent

August 2008

Dear Parent(s) or Guardian(s) of Pulaski County Public Schools:

According to Pulaski County School Board Policy JO, Pulaski County Public Schools will notify parents and eligible students of what information, if any, the division has designated as directory information. The policy states: "Directory information for Pulaski County Schools includes, but is not limited to: name of student, current age, attendance, participation in sports and other officially recognized activities, height and weight (if a member of an athletic team), awards and honors and other similar information."

Addresses and telephone numbers are considered confidential information and are protected under right to privacy laws except for requests by military recruiters who may request directory information including addresses and telephone numbers for juniors and seniors. We would like to give you the option of choosing whether or not your address and telephone numbers are also included as directory information when directory information is released to any person or agencies outside Pulaski County Public Schools or other agencies entitled to such information.

We respect your right of privacy. We also realize that some of you prefer to be contacted directly by other agencies via mail or telephone. Examples of agencies or organizations requesting information include, but are not limited to religious groups, parent/teacher organizations, booster groups, and others.

If your preference is to release your address and telephone numbers and declare them "directory information," please sign and return the bottom portion of this page. If we do not receive this signed request, your address and telephone number/s will not be released. Return it to your child's school by September 12, 2008.

Very truly yours,

Don Stowers
Superintendent

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I/We, the parent (s) or Guardian (s) of ____, student/s who are enrolled in _______________________________ School, part of Pulaski County Public Schools, declare our consent for the school to release our address and telephone number/s to agencies making such a request. I/We understand that my/our signature indicates permission to declare them directory information.

____|____

Parent/Guardian Date Parent/Guardian Date