MILITARY RECRUITERS OPT-OUT FORM

Withholding Consent from the Release of Certain Student Information
Under the “No Child Left Behind Act”

Please do not release the name, address and telephone number of
___________________________ (name of student) to: _______ military
recruiters and/or _______ institutions of higher learning (check all that
apply).

_________________________________        _________________________
Student Signature               Date

_________________________________        _________________________
Parent Signature               Date