

VALLEY CITY PUBLIC SCHOOL DISTRICT #2 VALLEY CITY, NORTH DAKOTA 58072 MODEL FORM FOR DISCLOSURE TO PARENTS OF DEPENDENT STUDENTS	Descriptor Code FGA-E6	1st Reading 03/15/21
	Adopted 03/15/21	Revised

MODEL FORM FOR DISCLOSURE TO PARENTS OF DEPENDENT STUDENTS

_____ Student's First Name	_____ Middle Initial	_____ Last Name
_____ Street Address	_____ City	_____ State Zip Code

Under the Family Educational Rights and Privacy Act (FERPA), the Valley City Public School District is permitted to disclose information from your education records to your parents (or one of your parents) if you are under 18 or if they claim you as a dependent for federal tax purposes. **If you will turn 18 this school year**, please indicate whether your parents claim you as a tax dependent.

Please check the appropriate box:

- ☐ Yes. I certify that my parents claim me as a dependent for federal income tax purposes.
- ☐ No. I certify that my parents do not claim me as a dependent for federal income tax purposes.

Signature: _____ Date: _____

If parents live at the same address, please list both in # 1.

1. _____ Name(s)	2. _____ Name(s)
_____ Address	_____ Address
_____ City, State, Zip	_____ City, State. Zip
_____ Telephone	_____ Telephone