



# Olympia School District

1113 Legion Way SE • Olympia, WA 98501 • <http://osd.wednet.edu>

## REQUEST FOR STUDENT DIRECTORY INFORMATION

Student Directory Information is subject to the Federal Family Educational Rights to Privacy ACT (FERPA), Olympia School District Policy and Washington State Public Disclosure rules.

To obtain student directory information, please complete this form and return it to: Student Information Services, Knox 111 Administrative Center, Room 109  
111 Bethel Street NE, Olympia, WA 98506

Phone: 360-596-6150

Fax: 360-596-6151

**REQUESTOR'S NAME:** \_\_\_\_\_

Name of Organization, if applicable: \_\_\_\_\_

Type of Organization, check all that apply.

- Vendor   
 Media   
 Parent Organization   
 Military   
 Higher Education  
 Yearbook   
 School Photographer   
 Other: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

### REASON FOR REQUEST\*

\*The requestor hereby understands that this data is being released with consent by the parent/legal guardian and that it shall not be used by any other person or entity other than the requesting party and shall only be used for the purpose described above.

Format Requested:    Excel    PDF    Word

Delivery Method:    Email    Standard U.S. Postal

**INFORMATION REQUESTED:** Please check all that apply

- |   |   |
|---|---|
| <input type="checkbox"/> Student Name                           | <input type="checkbox"/> Dates of Attendance                              |
| <input type="checkbox"/> Student Address                        | <input type="checkbox"/> Diplomas Issued and Awards Received              |
| <input type="checkbox"/> Student Phone Number (unless unlisted) | <input type="checkbox"/> Weight and Height of Team Members                |
| <input type="checkbox"/> Photograph                             | <input type="checkbox"/> Participation in Recognized Activities/Athletics |
| <input type="checkbox"/> Most recent previous school attended   |   |

Signature of Requestor: \_\_\_\_\_

Date: \_\_\_\_\_

**Information will be provided within 30 business days from the date of receipt of this request.**

<b>For District Office Use Only:</b> Date Received: _____ Date Processed: _____ Mode of Transfer: _____ Authorized By: _____ Processed By: _____
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