

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 New Town Public School District is permitted to disclose information from your education records to your parent(s), if you are under 18 or if your parent(s) claims 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. _____ | 2. _____ |
| Name | Name |
| _____ | _____ |
| Address | Address |
| _____ | _____ |
| City, State, Zip | City, State, Zip |
| _____ | _____ |
| Telephone | Telephone |

End of New Town Public School District Exhibit FGA-E6