



**OPT OUT FORM**

NAME OF CHILD	DATE OF BIRTH	DATE COMPLETED
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**INSTRUCTIONS**

The Service Coordinator is required to send directory information to notify the school district a child in First Steps is approaching age three. Directory information is the child's name, date of birth, parent's name, address, and telephone number.

If the parent does not want directory information sent to the school district, the parent must complete Section 1: Opt Out. The parent must return this form to the Service Coordinator before the transition plan meeting or directory information will be sent to the school district. The Service Coordinator contact information is included below.

If the parent wants to reverse the opt out decision, the parent must inform the Service Coordinator immediately in order for the parent to complete Section 2: Reversal of Opt Out.

**SECTION 1: OPT OUT**

I understand that, by signing this section, directory information **will not** be provided to the school district.

I understand if I change my mind and later want directory information sent to the school district, I must contact my Service Coordinator immediately because failure to notify the school district at least 90 days before my child's third birthday may result in a gap in services.

PARENT SIGNATURE	DATE OF PARENT SIGNATURE
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PRINTED NAME OF PARENT
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**SERVICE COORDINATOR**

SERVICE COORDINATOR NAME AND ADDRESS	SERVICE COORDINATOR PHONE NUMBER
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SIGNATURE OF AGENCY REPRESENTATIVE	DATE RECEIVED BY AGENCY
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**SECTION 2: REVERSAL OF OPT OUT**

I understand that, by signing this section, I am reversing my decision to opt out of sending directory information to the school district. I understand this form **will** be sent to the school district.

PARENT SIGNATURE	DATE OF PARENT SIGNATURE
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PRINTED NAME OF PARENT
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**REVERSAL OF OPT OUT - DIRECTORY INFORMATION**

CHILD'S NAME	DATE OF BIRTH
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PARENT NAME	PARENT PHONE NUMBER
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PARENT ADDRESS
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SCHOOL DISTRICT NAME	DATE FORM SENT TO SCHOOL
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