

Receipt of Code of Student Conduct and Directory Information

Student's Name:		School:	
I. Receipt of Code of Student Conduct			
As required by Section 22.1-279.3 of the Code of Virginia, Dinwiddie County Public Schools (DCPS) provides this Code of Conduct for the purpose of distribution to parents and students the Dinwiddie County School Board's standards of student conduct and Virginia's compulsory school attendance law. State law also requires that each parent of a public school student sign and return a statement acknowledging receipt of the School Board's standards of student conduct and the compulsory school attendance law.			
Please sign the statement below to acknowledge you have read the Code of Student Conduct, Virginia's compulsory school attendance law and all other information contained in the Code of Conduct and return this page to your child's school. By signing this statement, parents recognize their responsibility to assist the school in enforcing standards of conduct and attendance but do not waive their rights protected by the constitution or laws of the United States or the Commonwealth of Virginia. Parents have the right to express disagreement with a school's or the school division's policies or decisions.			
	Signature of Student Signat	ure of Parent/Guardian Date	
The Code of Student Conduct can be found online at https://www.dinwiddie.k12.va.us/students/code-of-conduct-sy-25-26/ Contact your student's school if you wish to receive a hard copy of the Code of Student Conduct.			
II. Authorization to Photograph/Videotape Physical Likeness			
□Yes □No		h my child and use his/her picture, silhouette, or other reproductions of physical rochures), videotapes, news releases, or television broadcasts of Dinwiddie County	
□Yes □No	□Yes □No I grant permission to photographers representing Dinwiddie County Public Schools to photograph my child for the school yearbook and release my child's full name, grade level and/or homeroom teacher to the yearbook publisher.		
□Yes □No	I grant permission to my child's school to release mailing label infor	mation to school picture/yearbook photographers and/or PTA/PTO.	
My signature below indicates that I have read and understand the meaning and effect of this release. Agreed and accepted:			
Signature of Pa	arent/Guardian	Date	
III. Directory and Other Information			
As stated in our Code of Conduct and policies and in accordance with state and federal law, no personal or confidential information concerning a student will be released without written consent of the parent or guardian. Certain types of information about students are considered directory information as specified in policy JO and is routine information that generally is not considered harmful to disclose. Consequently, this kind of information may be included in school publications and disclosed to outside organizations without the parent's prior written consent – unless the parent has opted out of such disclosure.			
Directory Information may include – but is not limited to – the following information:			
Yearbook plParticipationName, gendHeight and v	honors or degrees received by a student; notographs of the student; i in officially recognized activities and sports; er, date and place of birth, and dates of attendance; weight if he or she is a member of an athletic team; r graduations, plays, shows, concerts, or similar school events	 Yearbooks and class pictures, publications, or school advertisements; Photographs, digital images, or other reproductions/physical likeness in connection with newsletters, websites, brochures, videotapes, news releases, or similar that relate to the school, school sports, extracurricular activities, or school events; and Other similar information. 	n
In addition, the law requires school divisions to provide military recruiters and institutions of higher learning for all 11th and 12th grade students with the following information: names, addresses, and telephone listing. This information is automatically sent on our behalf from the Virginia Department of Education unless the parent/guardian or eligible student requests that this information is not released.			
Parents/guardians must submit a written non-disclosure request to the student's school to restrict disclosure of the information that is considered directory information. This non-disclosure request must be received by the student's school administration no later than ten (10) school days from the date on which the parent/guardian receives this notice regarding directory information. Please note that even if a parent or authorized student has decided to opt out of the release of directory information to such agencies, DCPS may release this information if the release is otherwise authorized by law.			
Please place a check in the box indicating any items that you do not permit Dinwiddie County Public Schools to disclose.			
☐ Student's pa	LOSE me, gender, birthdate and place of birth, and dates of attendance urticipation in officially recognized activities and sports ight and weight if he or she is a member of an athletic team I honors, or degrees received by a student	□ Student's name and honors received to members of the Virginia Gener Assembly (for purposes of congratulatory communication only) □ Student's name, address, and telephone listing for military recruiters □ Student's name, address, and telephone listing to institutions of higher learning	
At times, PTOs/PTAs, yearbook companies, athletic booster clubs, state, and county agencies, health screening companies, online payment services, and other organizations or companies that assist in the provision of services for students may require student names, addresses, home numbers, or email addresses. Virginia law prohibits Dinwiddie County Public Schools from disclosing a student's address, telephone number, or email address unless the parent or eligible student has affirmatively consented in writing to such disclosure.			
Please place a check in the boxes below indicating the items you authorize Dinwiddie County Public Schools to disclose in these situations.			
□ Student's address □ Student's telephone number □ Student's email address			
My signature below indicates that I have read and understand the meaning and effect of this release and that Dinwiddie County Public Schools may disclose information to such companies or entities as mentioned above, at the discretion of the Superintendent or the superintendent designee, taking into account the highest consideration of student confidentiality prior to any release. Agreed and accepted:			
Signature of Pa	arent/Guardian	Date	