FILED UNDER SEAL OBJECTION TO DISCLOSURE OF STUDENT INFORMATION AND RECORDS

I am a parent, guardian, or adult student who is eighteen (18) years of age or older.

I have read and understand the Notice of Potential Disclosure of Student Records.

<u>I OBJECT</u> to the disclosure of protected personal information¹ contained in documents in the possession of the New York City Department of Education or the New York State Department of Education in connection with the lawsuit entitled, *M.G.*, *et al. v. New York City Dep't of Educ.*, *et al.*, Southern District of New York, Case No. 13-CV-4639 (SHS):

Name of Parent/Guardian: Name of Student(s): Date of [Student] Birth: Student ID (if available): School last attended: Address:	
Reasons for Objections (optional – you are	e not required to provide any reason):
Date	Signature of Parent/Guardian or Adult Student/Former Student

This form must be sent via postal mail to:

The Honorable Sidney H. Stein c/o Clerk of the Court
Southern District of New York
500 Pearl Street, Courtroom #23A

New York, NY 10007

Attn: DOCUMENT FILED UNDER SEAL

This objection form must be received by the Court by August 7, 2016.

¹ "Protected Personal Information" includes but is not limited to: student names; parent and guardian names (including maiden names of mother); names of family members; social security numbers; home addresses; and home phone numbers; and date and place of birth.