

Leon's Law Parent/Guardian Opt-Out Form (Optional)

Student Information

Student's First Name	Middle Initial	Last Name
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Student's Date of Birth	PCC Student ID (if known)
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Parent/Guardian Information

Parent's First Name	Middle Initial	Last Name
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Relationship to the Student:	
Address:	
Phone Number:	
E-mail Address:	

Opt-Out Declaration

Under **Leon's Law (SL 2025-46)**, parents or legal guardians of minor students (under age 18) who are dependents for tax purposes are automatically granted access to their child's educational records at North Carolina community colleges.

By signing this form, I hereby opt out of receiving access to my minor child's education records. I understand that:

- This opt-out applies only to education records covered under Leon's Law.
- My child will be required to acknowledge parental access under Leon's Law.
- This opt-out may be revoked at any time by submitting a written request to the college's registrar.

Signature of Parent/Guardian: _____ Date: _____

For College Use Only

Date Received: _____ Processed By: _____

Notes: _____