ROCHESTER PUBLIC LIBRARY

City of Rochester
201 4th Street SE
Rochester, MN 55904

Phone: 507-328-2900
Fax: 507-328-2901
TDD: 507-328-2900

NOTICE TO PERSONS UNDER THE AGE OF 18

If you are under age 18, the information in your library account is available to your parent or guardian. Per MN Rules 1205.0500, you may ask to have this information withheld by completing this section of the form. The Office of City Clerk will determine if it is in your best interest. Some of the information you are asked to provide is classified as private data under state law. You have the right to request that some or all of the data not be given to one or both of your parents/legal guardians.

State law requires the City to determine if honoring the request would be in your best interest. The City must consider whether (a) you are of sufficient age and maturity to explain the reasons for your request and understand the consequences of asking that the data be withheld, (b) denying access may protect you from physical or emotional harm, (c) there are reasonable grounds to support your reasons, and (d) the data concerns medical, dental, or other health services provided under Minn. Stat. §§ 144.341 to 144.347. If so, the data may be released only if failure to inform the parent or legal guardian would seriously jeopardize your health.

If you wish to request that data be withheld, please complete the following:

Type of data to be withheld:_____

From whom:_____

Reason:_____

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

I have reviewed this notice and am requesting my Rochester Public Library data be withheld.

Print your name: _____Date of birth: _____

Signature: _____ Today's date: _____