

NORTH IDAHO COLLEGE

REQUEST TO PREVENT DISCLOSURE OF DIRECTORY INFORMATION

To: All Students

_____ Semester

_____ Year

The items listed below are designated as "Directory Information" and may be released for any purpose at the discretion of our institution.

Under the provisions of the Family Educational Rights and Privacy Act of 1974, you have the right to withhold the disclosure of any part or all of the "Directory Information" listed below.

Please consider very carefully the consequences of any decision you make to withhold "Directory Information." Should you decide to inform the institution not to release any or all parts of "Directory Information," any future requests for such information from non-institutional persons or organizations will be refused.

North Idaho College will honor your request to withhold any information listed below but cannot assume responsibility to contact you for subsequent permission to release them. Regardless of the effect upon you, the College assumes no liability for honoring your instructions that such information be withheld.

Please circle the number preceding the information you want withheld, sign this form, and return it to the Office of the Registrar no later than fifteen (15) days after the beginning of classes for the semester.

- 1. Student's Name
- 2. Address
- 3. Telephone Number
- 4. Class Schedule
- 5. Major
- 6. Dates or Registered Attendance
- 7. Classification
- 8. Date and Place of Birth
- 9. Participation in Officially Recognized Activities
- 10. Weight and Height of Members of Athletic Teams
- 11. Degrees, Certificates, and Awards Received
- 12. Previous Educational Institutions Attended

Student's Signature _____ ID# _____

Date _____
