



EASTERN CONNECTICUT STATE UNIVERSITY

REGISTRAR'S OFFICE • ALVIN B. WOOD SUPPORT SERVICES CENTER

83 Windham Street • Willimantic, CT 06226 • Office: (860) 465-5224 Fax: (860) 465-4382

Request for Revocation of Non-Disclosure of Directory Information Form

(Submit to Registrar's Office once completed)

Eastern Connecticut State University does not normally disclose directory information. However, at its discretion, it may provide directory information in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended. At Eastern Connecticut State University, directory information is limited to:

1. Student's name, official address, telephone number, and University issued e-mail address
2. School, major(s), minor(s), field of study
3. Participation in officially recognized activities and sports, weight and height of members of athletic teams
4. Dates of attendance, degrees, and awards received
5. The most recent educational agency or institution attended by the student
6. Expected date of completion of degree requirements and graduation
7. Enrollment status (e.g. full or part-time, undergraduate or graduate)

Under the provisions of FERPA, students have the right to withhold the disclosure of directory information. Student requests for non-disclosure may be made in the Office of the Registrar within two weeks.

Eastern Connecticut State University will honor your request to withhold any directory information item but cannot assume responsibility to contact you for subsequent permission to release them. Your request for non-disclosure will remain in effect until rescinded in writing (see below). Please consider very carefully the consequences of any decision by you to withhold directory information.

Please Note: Non-disclosure of directory information does not prevent Eastern Connecticut State University from disclosing personally identifiable information from a student's record to authorized representatives of federal, state and local agencies when that disclosure is in connection with financial aid for which the student has applied or which the student has received, or any of the other exceptions to signed consent found in §99.31 of the FERPA regulations.

I hereby authorize the Office of the Registrar at Eastern Connecticut State University to remove the non-disclosure block from my education record. Effective immediately, directory information may once again be released to the public, at the discretion of the University.

Last Name

First Name

M.

Date

Eastern ID #

Student Signature (Print and Sign)

For Office Use Only:

Received Date: _____ Received By: _____ Processing Date: _____ Processed By: _____