

**WALLACE COMMUNITY COLLEGE SELMA**

STUDENT REQUEST TO WITHHOLD PUBLIC INFORMATION

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_

Last First Middle

Social Security Number\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_ Term Fall Spring Summer 20\_\_\_\_\_

(Circle One)

The items listed below are considered as “Directory Information” by Wallace Community College Selma and may be released for any purpose at the discretion of the College.

Under the provisions of the Family Educational Rights and Privacy Act of 1974, as amended (FERPA), you have the right to withhold the disclosure of “Directory Information” listed below.

Please consider very carefully the consequences of any decision by you to withhold “Directory Information”. Should you decide to inform the College not to release this information, any future requests for such information from non-institutional persons or organizations will be refused.

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

Please sign below to indicate your disapproval for the College to disclose the following public or “Directory Information”:

Name

Date of Birth

Participation in officially recognized activities and sports

Major field of study

Weight and height of an athletic team member

Dates of attendance

Degrees and awards

Most recent educational institution attended

Student’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

If this form is not received in the Admission/Records Office prior to the third week of the term, it will be assumed that the above information may be disclosed for the remainder of the current academic year. A new form for non-disclosure must be completed each academic year.

FOR OFFICE USE ONLY

Processed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_