

Staff Only
Date Received: _____
Date Processed : _____
Processed by: _____



OFFICE OF THE REGISTRAR
FERPA Request to Withhold/Release Directory Information

Name: _____ Student Number: _____
Address: _____ Phone: (____) _____
City: _____ Email Address: _____
State and Zip Code: _____

Explanation of Directory Information

HBU reserves the right to publish your directory information unless you have instructed the University not to do so. HBU has designated the following student information as public or "directory information":

- Name, local and permanent address and telephone numbers
- Email addresses
- Date and place of birth and sex
- Classification
- Major field(s) of study
- Dates of attendance, degrees, and awards received
- Most recent previous educational institution attended
- Participation in officially recognized activities and sports
- Weight and height of members of athletic teams
- Photographs

Instruction to Withhold Directory Information

_____ **Please do not release any of my directory information. I understand this instruction will remain in effect until I submit a revised request in writing to the HBU Office of the Registrar.***

Student Signature

Date

Authorization to Release Directory Information

_____ **I have previously instructed HBU to withhold directory information. Please, remove the hold on my directory information. I understand that this release will remain in effect until I submit a revised request in writing to the HBU Office of the Registrar.**

Student Signature

Date

*Regardless of the effect upon you, HBU assumes no liability for honoring your instructions that such information be withheld.