

The federal Family Educational Rights and Privacy Act (FERPA) guarantees students the right to have some control over the disclosure of personally identifiable information from their education records. At its discretion, CGU may provide Directory Information in accordance with FERPA. Directory Information is defined as that information which would not generally be considered harmful or an invasion of privacy if disclosed. CGU designates the following student data as directory information: student name, email address, photo, degree/certificate program of study; concentration of study; dates of attendance, degrees or certificates received and their conferral date, and dissertation and/or thesis titles.

Students in attendance may request that the University restrict disclosure of their directory information by notifying the Registrar in writing; please note that such withholding requests are binding for all information to all parties except in circumstances as outlined in §99.31 of the Family Educational Rights and Privacy Act. Please consider very carefully the consequences of any decision by you to withhold any category of directory information. Such designation will require CGU not to release any or all of this information to third parties (including but not limited to potential employers, organizations, etc.) and prohibit the inclusion of your information in CGU publications such as the commencement program.

Restrictions remain in effect until revoked by the individual in writing. When a request to release a restriction is not made in person, a photocopy of the individual's current ID—a driver's license or passport—should accompany the written request.

Questions about restricting the disclosure of student information should be directed to the Registrar's Office.

Student Information

CGU ID# 254-_____ Last Name _____ First Name _____

Academic Department/Program _____ Degree _____

Please initial next to the information you wish NOT to be disclosed by CGU or, if you are revoking a previously imposed restriction, initial next to the information you now wish to have disclosed:

- | | |
|--|---|
| <input type="checkbox"/> Name | <input type="checkbox"/> Degree/certificate program of study |
| <input type="checkbox"/> CGU email address | <input type="checkbox"/> Concentration of study |
| <input type="checkbox"/> Dates of attendance | <input type="checkbox"/> Degrees, certificates, and honors received, including the conferral date |
| <input type="checkbox"/> Photograph | <input type="checkbox"/> Published dissertation/thesis title |
| <input type="checkbox"/> Most recent previous institution attended | |

TO PLACE A RESTRICTION ON THE DISCLOSURE OF INFORMATION

I hereby request that the University restrict my directory information as listed above from disclosure without my prior written consent. I understand the ramifications of my decision as outlined above and that this restriction will remain in effect until I provide written instructions to the University to revoke this request. Further, I acknowledge that the University may still disclose my personal information where excepted by FERPA.

Student's Signature _____ **Date** _____

TO REVOKE A PREVIOUSLY IMPOSED RESTRICTION ON THE DISCLOSURE OF INFORMATION

I hereby request that the University cancel and release the restriction I had previously placed on the disclosure of my directory information as listed above. I understand that by canceling this restriction, directory information may be released at the University's discretion and without my prior consent. As required, I have attached a copy of my official identification.

Student's Signature _____ **Date** _____