

Office of the University Registrar

29 Everett Street
Cambridge, MA 02138-2790
Phone: 617.349.8760
Fax: 617.649.4855
Submit a ticket online at:
support.lesley.edu

## REQUEST TO PREVENT DISCLOSURE OF DIRECTORY INFORMATION

All Students:

The Family Educational Rights and Privacy Act (FERPA) designates certain information related to students as "Directory Information". This gives the University the right to disclose such information to anyone inquiring without having to ask students for permission, unless the students specifically request in writing that all such information not be made public without their written consent.

If you wish to withhold the disclosure of all of the items of "Directory Information", complete the form below and submit it to the Office of the Registrar.

This form must be recieved in the Office of the Registrar prior to the close of the course Add/Drop period in any given semester or term to ensure that the above information is not released for the remainder of the semester. This form becomes invalid only upon written notification from the student to revoke this request.

Please consider very carefully the consequences of any decision made by you to withhold "Directory Information", as any future requests for such information from third parties will be refused. Lesley University will honor your request to withhold "Directory Information" but cannot assume responsibility to contact you for subsequent permission to release it. Regardless of the effect upon you, Lesley University assumes no liability for honoring your instructions that such information must be withheld.

For exceptions to your instructions to withhold, and for a description of your rights under FERPA, please go to:

http://www.lesley.edu/registrar/family-educational-rights-and-privacy-act/

I have carefully read the above and request that all "Directory Information" not be disclosed to third parties by the University without my prior written permission:

## Lesley University considers the following "Directory Information":

- · Student's name
- · Major field of study
- Dates of attendance and enrollment status for a particular semester
- Degrees and awards received including Dean's/President's lists and graduation honors

Student's Printed Name:			
(LAST)	(FIRST)	(MI)	
Lesley ID:	or last four digits of S	or last four digits of SSN:	
Student's Local/Campus Address:			
		(STREET)	
	(CITY)	(STATE)	
		(ZIP)	
Student's Phone (cell preffered):			
(CELL)		(HOME)	
Student's Signature:		Date:	
OFFICE USE ONLY			
PROCESSED BY:	DATE PROCESS	SED:	