



## Family Educational Rights & Privacy Act (FERPA) Form

### Request for Non-Disclosure Hold of Student Directory Information

The items described in Section 5a of the Student Rights under the Family Educational Rights and Privacy Act (FERPA) (as noted in College Catalog) are considered "Directory Information" and may be released for any purpose at the discretion of Trinity College of Nursing & Health Sciences. Under the provisions of the Family Educational Rights and Privacy Act of 1974, a student has the right to withhold the disclosure of "Directory Information."

Please consider very carefully the consequences of any decision by you to withhold any items contained in "Directory Information." Should you decide to inform the College not to release "Directory Information" any future requests for such information from noninstitutional persons or organizations will be refused.

Examples of, but not limited to, potential impacts are:

No acknowledgement of attendance at Trinity College of Nursing & Health Sciences to potential employers, no verification of degrees to requestors, no printing of your name in the commencement program, and no press releases pertaining to graduation/honors.

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

Non-disclosure will be enforced until the information is subsequently released by the student. The release must be in writing and sent to the College Registrar.

**DO NOT RELEASE ANY DIRECTORY INFORMATION**

**The box must be checked for form to be valid. Please check the box above and affix your signature to indicate your request that the College not disclose your Directory Information.**

Student Name: \_\_\_\_\_  
(Please Print)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

This form must be received in the Registrar's Office the first week of the academic term, and if not, it will be assumed that the above information may be disclosed.

### FOR OFFICE USE ONLY

#### Action Taken:

Registrar Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Retain Electronically in Student File