## EAST CENTRAL COLLEGE REQUEST TO RESTRICT DIRECTORY INFORMATION

Information must be printed or typed in black or blue ink. (Penciled forms will not be accepted.)

East Central College complies with the Family Educational Rights and Privacy Act (FERPA). All information other than directory information is restricted and will not be released without first obtaining the student's signed consent.\*

East Central College defines *directory information* as follows:

Student's Name City of Residence Program of Study Academic Classification (Freshman/Sophomore and Full-time/Part-time) Participation in Recognized Activities, including photographs of sponsored activities Dates of Attendance, including matriculation and withdrawal dates Degrees, Certificates, Recognitions, and Awards Received Individual or Group Photographs

If the release of directory information is restricted, personally identifiable information will not be released to third parties outside the college without your written consent. Your name will not appear in the commencement program.

I request that my directory information be restricted from release without my written consent. I understand that this restriction is enforced until I submit a request to remove the restriction.

Signature	Date	Student ID#
organizations, health agencies in eme	rgencies, court officials, third part	nformation without student consent to financial aid ties with valid subpoenas and others as defined in the onsult the East Central College Registrar if you have
Return this form to:	East Central College	
	Registrar's Office	
	1964 Prairie Dell Rd.	
	Union, MO 630	84
	636-584-6551	
	Fax: 636-583-1	897