Ferris State University

Request Form for Non-Disclosure of Directory Information

"Student directory [public] information" includes name, address, telephone number, date and place of birth, class, major field of study, dates of attendance, degrees and honors/awards received, previous institutions attended, participation in officially recognized sports and activities, and, if the student is an athlete, height and weight. The University may release all or any of these student directory information items for any purpose at its discretion.

Under the provision of the Family Educational Rights and Privacy Act of 1974, as amended, students have the right to withhold the disclosure of all their directory information. If a student wishes to exercise this right, he or she must complete this form and submit it to the Timme Center for Student Services per the instructions below. Any student who does not complete and submit this form in this manner gives the University approval for disclosure of their directory information.

All students should carefully consider the consequences of the decision to withhold the Ferris' release of directory information items. Once this request is processed, the University will not acknowledge to any third party, the existence of said student as an enrolled individual on any of its campuses. Nor will the University notify said student that it received a request for information from any third party. If said student decides to lift the request for non-disclosure, he or she must notify the Record's Office in writing of this intent. Students with a break in enrollment must resubmit this paperwork each time they re-apply if they wish to keep this confidentiality active.

Name (please print):	
Student ID / Social Security Number:	Date of Birth:
Email:	Phone:
Signature of Student:	Date:
Signature of School Official:	Date:
This request for non-disclosure must be filed by the end of the first week of the Fall semester to	

This request for non-disclosure must be filed by the end of the first week of the Fall semester to assure information will not be published in the student directory. Please return the completed form in person with a picture ID to: Ferris State University, Timme Center for Student Services, 1201 S State St, CSS 101, Big Rapids MI 49307-2747.

For Office Use Only: Received Date: _____ Processing Date: _____ Processed By: _____