

Office of the Registrar

Release of Directory Information Form

Students at Kennesaw State University has established categories of information known as "Directory Information" and may release this information without student consent, upon request. Under the provisions of the Family Education Rights and Privacy Act of 1974, as amended, you have the right to withhold the disclosure of the categories of "Directory Information" listed below.

Name: _____

KSU ID: _____ Phone: _____

KSU Email: _____

Petitioned to Graduate: Yes No

The items listed below are designated as "Directory Information" at Kennesaw State University and may be released for any purpose at the discretion of Kennesaw State University.

- Name
- Major
- Advisor
- Dates of Attendance
- Degrees Awarded
- Participation in Recognized Activities and Sports
- Weight and Height of Athletic Participants

Please consider very carefully the consequences of any decision by you to withhold "Directory Information." Should you decide to inform Kennesaw State University not to release this "Directory Information," any future requests for such information from non-institutional persons or organizations will be refused. Directory information will also be withheld from a variety of sources including YOU - THE STUDENT (without photo ID), friends, relatives, prospective employers, honors societies, news media, and institutional publications such as graduation lists and programs.

Kennesaw State University will honor your request to withhold any "Directory Information" but cannot assume responsibility to contact you for subsequent permissions to release them. Regardless of the effect upon you, Kennesaw State University assumes no liability for honoring your instructions that such information be withheld.

I have read the above and I wish to **WITHHOLD** "Directory Information" which will mark my record as confidential.

I request to **REMOVE THE CONFIDENTIAL INDICATOR** from my records.

Student Signature: _____

Date: _____

****A copy of your KSU Talon Card or Government Issued ID must be attached.***

Office of the Registrar Use Only

Initials: _____ Date: _____

Comments: _____