

REQUEST TO WITHHOLD DIRECTORY INFORMATION

This form is used to request that Colorado Mountain College prevents the disclosure of directory information.

Colorado Mountain College hereby gives notice that it has designated certain items as "Directory Information" under the Family Educational Rights and Privacy Act of 1974. Directory Information concerning students at the College can be released without prior written consent of the student as permitted by law unless the student has notified Colorado Mountain College that such information should not be released without his or her consent.

"Directory Information" at Colorado Mountain College is as follows:

- student name
- dates of attendance
- enrollment status
- degree and awards received
- activity and sport participation
- major

If you wish this directory information not be available to the public from your records, this form must be signed and returned to the Site/Campus registration staff. Upon receipt of the signed form, no directory information will be released until rescinded, in writing, by the student. Only currently enrolled students may request that directory information be withheld.

Important Note: Please be advised that once you have completed this form this block will permanently remain on your record until you request, in writing, that it be removed. Any future requests for this information from

other schools, prospective employers or others will be refused. CMC will honor your request to withhold this information but cannot assume the responsibility to contact you every time a request is received. **Last Name** First Name MI Student ID I, the undersigned, hereby request the Registrar's Office of Colorado Mountain College to restrict the release of Directory Information contained in my file at CMC. I understand that none of my Directory Information will be released unless I, the undersigned, should subsequently provide written consent to release this Directory Information. **Student Signature** Date **OFFICE USE ONLY** Processor Colleague Etrieve RESCIND/CANCEL I hereby rescind the above request to withhold my Directory Information. I understand that Colorado Mountain College can resume releasing my Directory Information as permitted by law when requested. **Student Signature** Date **OFFICE USE ONLY**

Date

Processor_

Etrieve

Colleague