

INFORMATION RESTRICTION

The University of Alabama in Huntsville

Charger Central

University Center Room 118

Huntsville, AL 35899

Phone: 256-824-7777 - Fax: 256-824-7780

Name: _____ Student ID: _____

University Policy on Release of Student Information – Under the Family Educational Rights and Privacy Act (FERPA) of 1974, students at UAHuntsville are provided certain rights of privacy in their educational records, and the use of such records by the University is regulated correspondingly. The Act provides that certain information pertaining to the student, designated as “directory information,” may be released by the University unless the student provides instructions to the contrary. The following is considered to be “directory information” at this institution: the student’s name, address (local and permanent), telephone number (including both the local and permanent number), personal email address, date and place of birth, enrollment status (full time or part time), class standing (freshman, sophomore, junior, senior or graduate student) major field of study, participation in officially recognized activities and sports, weight and height statistics of athletic members, dates of attendance, degrees and honors/awards received, the most recent previous educational agency or institution attended by the student, and a photograph of the student. If you do not wish the University to release the foregoing “directory information” concerning you, you must make a written request to the Office of Student Records. Information about you from your education record, other than that listed above, will not be released to third parties unless you specifically authorize such disclosure or unless a FERPA exception applies. Information about you will not be released without your written consent. The University **does not** have a blanket authorization; a written consent from you must be submitted for each inquiry.

Please do not release my “directory information”.

Signature: _____ **Date:** _____

Please remove the current information restriction from my record. I give the University my permission to release my “directory information”.

Signature: _____ **Date:** _____