REQUEST FOR NON-DISCLOSURE OF “PUBLIC INFORMATION”

Indiana University East does not normally disclose "public information" (a.k.a. “directory information”). However, at its discretion, it may provide "public information" in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended. At IU East, “directory/public information” is limited to:

- student's name, address, telephone number, email address, major field of study, dates of attendance, admission or enrollment status, campus, school, college, division, class standing, degrees earned, awards, activities, sports, athletic information, and the most recent previous educational agency or institution attended.

Under the provisions of FERPA, students have the right to withhold the disclosure of "public information". Student requests for non-disclosure may be made in the Registrar's Office any time during the semester.

IU East will honor your request to withhold any "public information" item but cannot assume responsibility to contact you for subsequent permission to release them. Your request for non-disclosure will remain in effect until rescinded in writing (see below). Please consider very carefully the consequences of any decision by you to withhold "directory information".

PLEASE NOTE: Non-Disclosure of Directory Information does not prevent IU East from disclosing personally identifiable information from a student's record to authorized representatives of Federal, State and local agencies when that disclosure is in connection with financial aid for which the student has applied or which the student has received.

*** PERMISSION TO REVOKE MY PREVIOUS NON-DISCLOSURE BLOCK ***

I hereby authorize the Office of the Registrar at Indiana University East to remove the non-disclosure block from my educational record. Effective immediately, “directory information” may once again be released to the public, at the discretion of Indiana University East.

_________________________  __________________________
Student’s Name                          Date

_________________________  __________________________
Student Records Representative                Date of Revocation