

FERPA Full Privacy/Nondisclosure of Directory Information Request

This form must be completed in person with a photo ID in the Office of the Registrar.

Under the provisions of the Family Education Rights and Privacy Act of 1974 (the "Buckley Amendment"), you have the right to have directory information withheld from the public. If you do not submit this form, only the following items designated as directory information may be disclosed to all inquirers.

- Student name. *(If provided, preferred name will be used when there is not a documented business or legal reason to use primary name. Students may select a diploma name for graduation and commencement materials.)*
- Campus email address.
- Dates of attendance.
- Previous educational institutions attended.
- School/college or division of enrollment.
- Majors, minors and field of study.
- Classification level (e.g., freshman, graduate student).
- University-recognized honors and awards.
- Degree status (e.g., expected graduation date, degree conferral date or term).
- Enrollment status.
- Employment related to student status (e.g., teaching assistant, resident assistant, work-study) and dates for positions held.
- Participation in officially recognized activities or sports, including height and weight of athletes.
- Photos and videos taken or maintained by the university.

Considerations

1. Please give careful consideration to the consequences of withholding directory information. Should you do this, any future requests for such information, including the fact that you are enrolled, from persons or organizations unaffiliated with the university *will be refused*. Our response when an inquiry is received about your student record will be, "We have no information about this person."
2. The university will not contact you when a request for information is made; therefore, if you *do* wish to have information released to a specific person or organization while this request is in effect, you must establish a FERPA Consent to Release for them (see www.colorado.edu/registrar/FERPA-consent). No information will be released to anyone, *including you*, without proof of identity.
3. The university will not print your name in graduation, honors and/or awards lists, including newspaper listings if appropriate, unless you file a second written request to cancel your privacy request at least one month prior to graduation. Since nondisclosure stays on your record until you file a written request to remove it, please be aware that this *will prevent disclosure* of your information to any and all prospective employers.
4. You must be a registered student during the term for which you are requesting nondisclosure of information.
5. In order to apply to printed student directories, any new requests or cancellations must be submitted by the end of the second week of classes for the given term. After that date, the university cannot guarantee that your directory information will not appear in a printed publication.
6. Your information in the CU Student Integrated Systems (CU-SIS) will not be given out to any third party from the effective date forward. You may still authorize select individuals (e.g., parents) to access your records by establishing FERPA Consent to Release or CU Guest Access (see www.colorado.edu/registrar/privacy for details).
7. The Colorado Open Records Act states that University of Colorado faculty and staff employee records are a matter of public record. Therefore, if you are a student and are also working for the university in a position other than as a work-study, student assistant, RA, TA, etc., your faculty- or staff-related information is public record.
8. The University of Colorado Boulder provides some campuswide services that use the campus network IdentiKey, which may be a name-based identification. You may change your IdentiKey by contacting the Office of Information Technology (OIT) Help Desk at 303-735-HELP.

Note: If you have authorized payers who can view and pay your tuition and fee bill in CUBill&Pay, their access to the bill will not be affected by this request. They will maintain access unless you choose to revoke their access yourself. If you choose this option, an email will be sent to the authorized payer stating that their access has been revoked.

This request will be honored until you file a written request for the university to cancel it.

Student name (print): _____ Student ID number: _____

Student signature: _____ Effective date: _____

PLEASE CANCEL THE ABOVE REQUEST FOR FULL PRIVACY

Student signature: _____ Effective date: _____