

Student Name \_\_\_\_\_ ID# \_\_\_\_\_

In accordance with my rights as an eligible student under the federal Family Educational Rights and Privacy Act, 20 U.S.C. 1232g, I hereby request that Citrus College:

- Not release directory information about me from my education record(s) without my written consent
- Release directory information about me

I understand that directory information includes the following:

- Name
- Dates of attendance
- Major field of study
- Student participation in officially recognized activities and sports including weight, height and high school of graduation of athletic team members
- Degrees and awards received by students, including honors, scholarship awards, athletic awards and Dean's List recognition

I understand that if I opt to withhold directory information about me, Citrus College will not be able to publish, without my written consent, my name on the graduation list, indicate honors I receive, and verify graduation and attendance for me to employers or other parties.

This request about my directory information shall become effective immediately and shall remain in effect until revoked by me, in writing.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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 A&R Office Only

Received by \_\_\_\_\_ Date \_\_\_\_\_

Processed by \_\_\_\_\_ Date \_\_\_\_\_

SPAIDEN