



Request to Prevent Disclosure of Directory Information

Academic Year: _____

Student Name: _____ ctcLink ID: _____
Please Print

The items listed below are designated as “Directory Information” and may be released for any purpose at the discretion of our institution:

Student name, address, telephone number, date and place of birth, major field of study, eligibility for and participation in officially recognized activities, organizations, dates of attendance, honor roll, enrollment status, degrees and awards received, student photo, student e-mail address, and the most recent previous educational agency or institution attended by the student.

Under the provisions of the Family Educational Rights and Privacy Act of 1974, as amended, you have the right to withhold the disclosure of Directory Information.

Please consider very carefully the consequences of any decision by you to withhold Director Information. Should you decide to inform Clover Park Technical College (CPTC) not to release Directory Information; any future requests for such information from non-institutional persons or organizations will be refused.

CPTC will honor your request to withhold Directory Information but cannot assume responsibility to contact you for subsequent permission to release them. Regardless of the effect upon you, the institution assumes no liability for honoring your instructions that such information be withheld.

Your signature below indicates your disapproval for the institution to disclose the above Directory Information for the academic year indicated.

Date: _____ Student Signature: _____

**A new form for non-disclosure must be completed each academic year.
A valid photo ID must be presented with this form.**