



FERPA DIRECTORY INFORMATION OPT OUT FORM

Student Name: _____ Student ID: _____

In accordance with the Federal Educational Rights and Privacy Act of 1974 (FERPA), as amended, a student's education records are maintained as confidential by Lively Technical College and, except for a limited number of special circumstances listed in that law, will not be released to a third party without the student's prior written consent. The law, however, does allow the College to release student "directory information" without obtaining the prior consent of the student. At Lively Technical College we consider "directory information" to be those items of information listed below in this Form. If you do not want the College to release your directory information without your prior consent, you may choose to "opt-out" of this FERPA exception by signing the Form below. Directory information of a student who has opted-out from the release of directory information, in accordance with this policy/procedure for opting out, will remain flagged until the student requests that the flag be removed by completing and submitting the revocation section of this Form to the OFFICE OF Student Services or until the student leaves the College.

I request the withholding of the my personally-identifiable information that Lively Technical College has identified as Directory Information under FERPA which includes program of study, certification/credential earned, image/photograph, enrollment status, dates of attendance, awards/honors earned and date of graduation. I understand that upon submission of this Form, my information cannot be released to third parties without my written consent or unless the College is required by law or permitted under FERPA to release such information without my prior written consent; and that directory information will not otherwise be released from the time the Office of Student Services receives my Form until the opt-out request is rescinded.

I understand that I may not opt out of use of my student ID number because it is necessary identifying information for the College. I further understand that if directory information is released prior to the Office of Student Services receiving my opt-out request, the College may not be able to stop the disclosure of my directory information. I understand that I may request and challenge how my directory information is used by contacting the Registrar's Office at the College.

STUDENT PRINT NAME

STUDENT SIGNATURE

DATE

For official use only:

FORM RECEIVED BY: _____ DATE: _____

RESCISSION OF OPT-OUT REQUEST

I, the above named student, hereby rescind my request to opt-out from the release of directory information.

STUDENT PRINT NAME

STUDENT SIGNATURE

DATE

For official use only:

FORM RECEIVED BY: _____ DATE: _____