



## Annual Request to Prevent Disclosure of Directory Information

The items listed below have been classified by Clarke University as Directory Information and may be released for any purpose at the discretion of the institution:

1)full name, 2)campus mailing address, 3)campus phone number, 4)email address, 5)home address, city and state, 6) home phone number, 7)date of birth, 8)major field of study, 9)participation in officially recognized activities and sports, 10)height/weight of members of athletic teams, 11)dates of attendance, including current classification and year, matriculation and withdrawal dates, 12)degrees and awards received, 13)schedule of courses, 14)parent/guardian or other family member's name and city/state of residence, 15)most recent previous educational institution attended, 16)photograph, 17)full- or part-time status, and 18)class roster. Even though information is designated as Directory Information by Clarke University, this does not mean that Clarke will disclose this information, only that it may choose to disclose it.

Not included are social security number, race/ethnicity, gender, grades, grade point average, country of citizenship, and religion. An item of directory information may be disclosed by Clarke University for any purpose, without the prior consent of a student, unless the student has forbidden its disclosure in writing.

Under the provisions of the Family Education Rights and Privacy Act (FERPA) of 1974 as Amended, you have the right to withhold the disclosure of any or all of this information. Please consider very carefully the consequences of any decision by you to withhold any information. **Any such request must be renewed annually while you are enrolled but will remain in effect after you leave Clarke.** Any future requests for such information from non-institutional persons or organizations will be refused. **Should you determine that your information should be released at a future date, you will need to notify Clarke University in writing.**

Semester/Year: \_\_\_\_\_ Student ID Number: \_\_\_\_\_  
For office use only

Name: \_\_\_\_\_  
First Middle Last

\_\_\_\_\_ Please do not disclose any of my Directory Information.

**I have read all of the above and understand the following are consequences of submitting this form:**

- **I won't be listed in the student directory.**
- **If a current or prospective employer calls for information, Clarke will not be able to provide any information.**
- **My enrollment at Clarke cannot be verified. This could result in some missed scholarship or good student discount opportunities.**
- **I will not be recognized publicly for academic or athletic achievements.**

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

Date: \_\_\_\_\_ Signature of Receiving Officer: \_\_\_\_\_

Please return to the Office of the Registrar, MS 1717, Clarke University, 1550 Clarke Drive, Dubuque, IA 52001-3198