

REQUEST TO PREVENT DISCLOSURE OF DIRECTORY INFORMATION

920 _____ Year: 20 _____ Term: Spring Summer Fall
 Student ID Number

 Last Name First Middle

(_____) _____
 Phone Catamount Email Address

 Mailing Address

 City State Zip Code

Student's Signature: _____ Date: _____

The items listed below are designated as public or "*Directory Information*" and may be released for any purpose at the discretion of the Western Carolina University. Under the provisions and amendments of the Family Education Rights and Privacy Act of 1974, you have the right to withhold the disclosure of "*Directory Information*" by submitting a request.

Please Note:

- Students are warned that undesirable consequences frequently occur, such as student name not being published on the Deans' List or in commencement bulletins and requests from any person or organization, such as prospective employers, getting denied.
- Western Carolina University will honor your request to withhold "*Directory Information*" but