



Office of the Registrar
Request to Remove Directory Information Hold

Student Name: _____ Date: _____
ID Number: _____ Semester & Year _____

At Lawrence Technological University the following information is considered Directory Information about a student: dates of attendance, major field of study, class level, degrees and awards received, anticipated degree date and confirmation that you are enrolled here (enrollment status).

In accordance with the provisions of the Family Education Rights and Privacy Act (FERPA), this Directory Information can be released to the general public and may be listed in the campus directory. Students may withhold this information from being released by notifying the Office of the Registrar in writing. Students have the opportunity to request that the Directory Information NOT be released to non-university personnel nor listed in the campus directory for one year and must renew this form each year. (see dates above) Please note that in compliance with federal regulations there are situations in which particular information may be released, upon presentation of official documents, to designated state, local or government agencies.

Currently, you have requested that the University withhold releasing the designated Directory Information about you to the general public. By completing and submitting this form to the Office of the Registrar, you are hereby requesting that this hold be lifted immediately as of the date the form is received in the Office of the Registrar.

Once this form is received in the Office of the Registrar, it will be processed and the Directory Information will be provided about you, if the University receives inquiries.

Lawrence Technological University will honor your request to now release this previously withheld information but cannot assume responsibility to contact you for subsequent permission to hold the Directory Information. Regardless of the effect upon you, Lawrence Technological University assumes no liability as a result of honoring your instructions that this information be released.

Student Signature _____ Date _____

REGISTRAR'S OFFICE USE ONLY:
DATE RECEIVED:
DATE ENTERED:
REGISTRAR'S STAFF SIGNATURE:

Updated 06/2006