



Registrar's Office
2000 Clayton State Blvd ■ Student Center ■ Morrow, GA 30260-0285
Phone: (678) 466-4145 ■ Fax: (678) 466-4169 ■ www.clayton.edu/registrar

Request to Prevent Disclosure of Directory Information

The items listed below are designated "Directory Information" and may be released for any person at the discretion of our institution.

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

Please consider very carefully the consequences of any decision by you to withhold "Directory Information." Should you decide to inform the institution not to release your directory information, any future request for such information from non-Clayton State University personnel or organizations will be refused.

Clayton State University will honor your request to withhold the information listed below, but we cannot assume responsibility to contact you for subsequent permission to release the requested information. Regardless of the effect upon you, the university assumes no liability for honoring your instructions that such information be withheld.

Your signature below indicates you have read and understand the following consequences. Your name will be excluded from all university publications including, but not limited to the Commencement program, the Honors Convocation program, National Student Clearinghouse and Dean's List. IF an employer requests information regarding your enrollment or degree completion, this information along with any other requested information WILL NOT be confirmed.

Directory Information which will be withheld:

1. Name
2. All mailing addresses
3. Class (i.e. freshman, sophomore, junior or senior)
4. Dates of attendance
5. Full/part time enrollment status
6. Degree/awards received
7. Current major/degree
8. Previous institutions attended
9. Date and place of birth
10. Participation in university activities and sports
11. Weight and height or athletic team members
12. Photograph

Name (PRINT) _____ Laker ID _____

Signature _____ Date _____