



Request for Non-Disclosure of Directory Information

Family Educational Rights and Privacy Act (FERPA) of 1974

20 USC § 1232g and 34 CFR § 99

Instructions to Student: Carefully read the information below. After completing the form, make a copy for your records and submit the original copy to the Registration Office.

The items listed below are designated as “Directory Information” at Navarro and may be released for any purpose at the discretion of the College.

Name, Address, Telephone Number, Dates of Attendance, Class, Previous Institution(s) Attended, Major Field Of Study, Awards, Honors, Degree(s) conferred (including dates), Past and Present Participation in Officially Recognized Sports of Activities, Physical Factors (Height, Weight of Athletes), and Date of Place of Birth.

Under the provisions of the Family Educational Rights and Privacy Act (FERPA) of 1974, as Amended, you have the right to withhold the disclosure of your Directory Information.

Please consider very carefully the impact of your decision to withhold your Directory Information. Should you request that Navarro College not release your Directory Information, any requests for the Information from non-institutional persons or organizations will be refused. FERPA allows students the right of non-disclosure of directory information only. Navarro College may disclose information, even if you request otherwise, under the exceptions to FERPA’s consent requirement (34 CFR § 99.31).

Please complete the following statement and sign below.

I, _____, _____
(Print Name) (Student I.D. Number)

Request that Navarro College not release my directory information. I understand that my Request for Non-Disclosure of Directory Information will remain in effect until I notify the Registrar’s Office at Navarro College in writing to cancel it or for any exceptions to non-disclosure of Directory information, e.g., degree verifications by potential employers. I understand that Navarro College assumes no liability for honoring my request for non-disclosure of directory information.

Signature: _____ Date: _____