

Shippensburg University Office of the Registrar Place or Remove Hold of Directory Information

Please Print:

Name: _____ S.U. ID.No.: _____
Last, First

Under the provisions of the Family Educational Rights and Privacy Act of 1974 (FERPA), I am instructing Shippensburg University to **change** my preference on the release of my directory information.

By signing below, I understand that the University will place/remove an information hold on my records. The placement of an information hold on my record indicates that no directory information will be released to any third parties. The removal of the information hold indicates that directory information **ONLY** will be released to any third parties upon request. Directory information includes my name, address, phone number, email address, enrollment status, major, degree and honors. **The hold/release will remain in effect unless I instruct the University in writing to change my preference on the release of my directory information.** I understand my information remains available to university staff to be used for official purposes. By choosing to change my preference on the release of my directory information, I am not giving up my privacy rights as outlined by FERPA.

Check One:

Change my preference to DO NOT RELEASE my Directory Information to any third party.

Change my preference to OK TO RELEASE my Directory Information to any third party.

Signature: _____ Date: _____

Return the completed form to the Registrar's Office, Old Main 111, email to registr@ship.edu or FAX to 717-477-1388.

Please click [here](#) to view the Family Educational Rights and Privacy Act (FERPA)