

SEMESTER _____ **COMPLETED**

Student's Name LAST FIRST MI	UA ID No. _____ (or SSN)
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The university may release certain directory information to the public on a routine basis unless a student requests, in writing, that the university not release it. Please use this form to request that directory information either be withheld or released.

Any request to withhold directory information will continue until a student provides permission in writing, for the university to release such. After that, information will be released when appropriate.

Names of students who have requested their directory information to be withheld:

- 1) **Will not** appear in the published university chancellor's and dean's lists, commencement programs, media publications, directories and other university publications
- 2) **Will not** be able to have their attendance and/or degree verified by a third party (i.e. National Student Clearinghouse)
- 3) **Will only** be able to discuss their student record with UA staff **IN PERSON**.

Photo ID will be required to discuss your account.

The following is considered directory information: <ol style="list-style-type: none"> 1. Name 2. Electronic mail addresses 3. Hometown: city, state 4. Weight and height of students on athletic teams 5. Dates of attendance at UAF 6. Program/major field(s) of study 7. Degrees and certificates received, including dates 8. Participation in officially recognized university activities 9. Academic and co-curricular honors, awards and scholarships, including dates received. 	Please select one of the following requests and return to the Office of the Registrar: <p>Legible photocopy of government issued photo ID must accompany this request if submitting via fax or mail.</p> <p><input type="checkbox"/> I request that directory information, as identified in the current UAF catalog, not be disclosed for me. I understand I will not be able to discuss my student account except in person with photo ID.</p> <p><input type="checkbox"/> I request that you release the confidentiality hold on my records at UAF.</p> <p>No directory information will be released until the last day of late registration.</p>
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Student's Signature _____	Date _____
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REGISTRAR'S OFFICE	Processed by _____	Date _____	Registrar's Office Only
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