## **FERPA**

## Revocation of Confidentiality/Directory Exclusion



	CONTACT PHON	IT ID (OR SOCIAL SECURITY) NUMBER
nce with the federal Family	y-requested Confidentiality/Directory Exclus ormation from your student record in accor PA). The State University of New York at Osw	ork at Oswego to release directory infor
Major field of study	Previous educational institution(s)	nt name •
<ul><li>Class Year</li><li>Expected date of graduation</li></ul>	attended  Dates of attendance	ess (including e-mail)
• Enrollment status (Full/Part-tim	<ul> <li>Dates of attendance</li> <li>Degrees, honors, and awards received</li> </ul>	
ai an	on-university personnel without written per	•
SIOII.	mi-university personner without written per	student information is released to non-
Code of Student Rights,	olicies is available in the Student Handbook	
		ibilities and Conduct.
		ent Authorization:
		cht Authorization.
		ning below, I hereby authorize SUNY Osw
Exclusion block from my student r	swego to remove the Confidentiality/Directo	
Exclusion block from my student r	swego to remove the Confidentiality/Directo	
Exclusion block from my student r	swego to remove the Confidentiality/Directo	IT'S SIGNATURE
Exclusion block from my student r		it'S SIGNATURE
Exclusion block from my student r	DATE	it's signature to the online directory will take effect v
Exclusion block from my student r	DATE	
	t within two business days of receipt.  n, with appropriate identification, at 301 C	to the online directory will take effect v
	t within two business days of receipt.  n, with appropriate identification, at 301 C	to the online directory will take effect v
	t within two business days of receipt.  n, with appropriate identification, at 301 C	to the online directory will take effect v ed forms must be presented in person, wego, Registrar's Office, 301 Culkin Hall,
	t within two business days of receipt.  n, with appropriate identification, at 301 C	to the online directory will take effect v