

**ST. ANDREWS PRESBYTERIAN COLLEGE
OFFICE OF STUDENT AFFAIRS
NOTICE OF DIRECTORY INFORMATION**

The College without consent of the student may disclose directory information unless the student has restricted the release of this information. The College designates the following categories of student information as Directory Information:

Student's name	Status(full or part-time registration)
Local/residence hall address	Degree received
Local/residence hall telephone	Honors and awards received
Official College E-mail address	Participation in officially recognized activities
Class standing/classification	Dates of attendance
Academic Program (degree, major, minor)	Weight and height of athletic team members

Students may remove or set the restriction to release Directory Information at any time during the semester, and this will dictate whether or not the student's information is found in the College's electronic directories. The printed directory, however, is published only once each semester. For the printed directory, students must remove or set the restriction to release Directory Information prior to the end of the second week of classes in the Fall Semester.

Check the appropriate boxes to restrict the release of your name, address, telephone number, e-mail and/or *Directory Information*. The restriction will prevent the release of the information in St. Andrews Presbyterian College's paper and electronic directories, and in response to telephone and written inquiries, except as authorized by law. Note: Permanent addresses and Residence Hall room numbers are restricted from disclosure. **Return the form to the Office of Student Affairs, Belk Student Center.**

_____ **DO NOT RELEASE LOCAL/RESIDENCE HALL ADDRESS, LOCAL/RESIDENCE HALL TELEPHONE NUMBER AND OFFICIAL COLLEGE E-MAIL ADDRESS:** I acknowledge that my local/residence hall address, local/residence hall telephone number and official college e-mail address will not be released, however, all other directory information may be released to third parties.

_____ **DO NOT RELEASE LOCAL/RESIDENCE HALL ADDRESS AND LOCAL/RESIDENCE HALL TELEPHONE NUMBER:** I acknowledge that my local/residence hall address and local/residence hall telephone number will not be released, however all other directory information (including my official college e-mail address) may be released to third parties.

_____ **DO NOT RELEASE ANY DIRECTORY INFORMATION:** I acknowledge that all directory information will not be released. The response given to all third party inquiries is, "**We have no available information regarding this person.**"

Out right Restriction status is assigned only after an IN-PERSON consultation with the Office of Student Affairs.

Note regarding the removal of Outright Restriction: An in-person consultation or a signed written request is necessary to remove this restriction.

_____ **REVOCAION OF PRIOR RESTRICTIONS:** I hereby revoke all prior restrictions and I acknowledge that the College may release all directory information to third parties.

Student Name (PLEASE PRINT)

Student SSN

Student Signature

Date