Guidelines to Protect the Privacy of Student Records
at the University of Louisville

Request to Withhold Disclosure of Directory Information

To: All students in the University of Louisville

The items listed below are designated as “directory information.” They are not generally considered harmful or an invasion of privacy if disclosed, and they may be released at the discretion of the university. Under the provisions of the Family Educational Rights and Privacy Act of 1974, you have the right to direct UofL to withhold the disclosure of your directory information. UofL will comply with your request for non-disclosure of directory information, although it may take as long as two business days for the university to process the change.

Please consider very carefully the consequences of any decision by you to withhold directory information. Should you decide to instruct the University of Louisville not to release your directory information, any future requests such as those from potential employers and other interested parties without the student’s written permission will be refused.

The university will honor your request to withhold directory information but cannot assume responsibility to contact you for subsequent permission to release them. Regardless of the effect upon you, the university assumes no liability for honoring your instructions that such information be withheld.

Students may direct the university to withhold disclosure of EITHER Category A (address information) OR Category B (all directory information, including address information) listed on page two. Please check the appropriate category and affix your signature below to indicate your instructions to the university to withhold disclosure.
PLEASE PRINT all but signature:

Name of Student: ____________________________________________

Date: __________

Signature of Student: _________________________________________

Enrollment Unit: _____________________________________________

Student ID no. : _____________________________________________

UofL FERPA FORM
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