



WALLA WALLA COMMUNITY COLLEGE

REQUEST FOR PRIVACY

_____ Date

_____ SID #

_____ Student Name

_____ SSN#

Walla Walla Community College designates the below items as public or “directory information”. Such information may be disclosed by the college at its discretion. You may withhold disclosure of any item(s) under the Family Education Rights and Privacy Act by checking them below. This request must be completed **quarterly** to remain effective.

Please consider carefully the consequences of your request as all requests for such information from non-instructional persons or organizations will be refused for the quarter indicated above. In honoring your request the college assumes no responsibility to contact you for subsequent permission to release the checked information. Regardless of the effect upon you, the institution assumes no liability for honoring your instructions that such information be withheld that such information be withheld.

- | | |
|--|---|
| <input type="checkbox"/> Name
<input type="checkbox"/> Phone number
<input type="checkbox"/> Dates of attendance
<input type="checkbox"/> Previous institutions attended
<input type="checkbox"/> Degrees and certificates conferred
<input type="checkbox"/> Participation in athletics
<input type="checkbox"/> Give no information or indication that I am a Walla Walla Community College student. | <input type="checkbox"/> Address
<input type="checkbox"/> Program of Study
<input type="checkbox"/> Schedule of classes
<input type="checkbox"/> Awards and honors
<input type="checkbox"/> Date and place of birth
<input type="checkbox"/> Physical factors for athletes |
|--|---|

Please provide your schedule of classes this quarter so that your instructors can be notified of your wish to withhold the directory information checked above.

Class	Room	Time	Instructor

To: Instructor

The above student has asked that his or her file be sealed or that limited information be given to inquirers. Please do not release any of the above checked information.

Note: It is a violation of federal law to release any student information for this student or any other student in your class. If you have questions about releasing student information to anyone other than the student, please contact the Office of Admissions & Records at 509-527-4282.