



Request to Prevent Disclosure of Directory Information

STUDENT ADMINISTRATIVE SERVICES

Potsdam Campus: PO Box 5575, Potsdam, NY 13699-5575 | (315) 268-6451

Capital Region Campus: 80 Nott Terrace, Schenectady, NY 12308 | (518) 631-9835

Student name

Student number

For detailed information on University policy regarding the release of student information, see: [Clarkson Regulations, IX-J, Access to and Privacy of Student Records](#)

In order to withhold information from the printed student directory, this form must be received by the end of the tenth day of class during the fall term. A new form for non-disclosure should be completed each academic year.

General Information Hold

Please withhold directory information from the student directory and anyone who may inquire as follows:

Addresses

- Dorm or local address
- Campus mail box address
- Home address
- Email address
- Other: _____

Phone numbers

- Dorm or local phone number
- Cell phone (not published unless requested)
- Home phone
- Other: _____

- Student ID photo

Comprehensive Information Hold (requires conversation with the Registrar)

- Do not release any information about me, even the fact that I am attending the University. I understand that this directive may have a negative impact since the University will not be able to confirm enrollment, nor confirm graduation, possibly impacting future employment searches.

This hold will remain in effect (even after you leave the University) unless a subsequent written request to change or release the hold is submitted. This may impact future verification of enrollment or graduation by perspective employers.

Student signature

date

Registrar signature

date