UT MARTIN

## Release of Directory Information Form

Under the Family Educational Rights and Privacy Act of 1974, release of personally identifiable student education records (other than directory information) to any party other than those specified by FERPA is not permitted without your written consent. Furthermore, you may elect to restrict the "Directory Information".

UTM classifies the following information as Directory Information:

- Name
- Semester (local) and permanent address
- NetID & Email address (university-supplied)
- Telephone number
- Most recent previous educational institution attended
- Graduate or undergraduate level
- Classification (freshman, sophomore, junior or senior)
- Full-time or part-time status
- College of enrollment
- Major
- Dates of attendance
- Degrees, Honors and Awards
- Participation in school activities and sports and photographs of such
- Weight and height of students participating in intercollegiate athletics

**Please indicate with a check mark your understanding of the following statements:**

☐ I understand it may take at least one week from the date of receipt for all offices to process this non-release request.

☐ I understand that my information will be restricted until this office is notified in writing.

☐ I understand that this does not prevent disclosure to University personnel who have a need to know consistent with their official duties for the “UT” or to persons outside the University if such outside disclosure:
(1) is permitted by me in writing;
(2) is in connection with my application for or receipt of financial aid;
(3) is in connection with my application to or my previous enrollment in another school;
(4) is pursuant to a lawfully issued subpoena or court order;
(5) is required by a health or safety emergency;
(6) is otherwise required or permitted by law.

☐ I understand that the university will:
(1) Not include your name, address, or phone number in the Telephone Directory:
(2) Not include your e-mail address in the electronic directory;
(3) Not include your name, hometown, and any applicable honors from published Chancellor's Honor Roll listings.
(4) Refuse to release any information about you to your insurance company, current or future employers, all types of media, and any non-institutional persons or organizations;
(5) Give no financial aid or personal information over the phone;
(6) State “We can not provide any information on that person” to any request for information.

**SELECT ONLY ONE OPTION BELOW**

◯ Restrict all my directory information
◯ Remove restrictions of all directory information

Student Legal Name: _____ Student ID: * _____

Local Phone: _____ Student Email: _____

Student Signature: * _____
Signature

_____
Date

☐ Verified with photo ID