



Southern
 Illinois University
Carbondale

REQUEST TO RESTRICT THE RELEASE OF INFORMATION

Office of Records and Registration, Woody Hall A-103, Mailcode 4701, Carbondale, IL 62901
 Phone 618-453-2999; Fax 618-453-2915

I, _____ SIUC ID#: _____
 Please print: Last Name, First Name, Middle Name

hereby request that Southern Illinois University Carbondale restrict the release of all of the following student directory information about me in accordance with the University's policy and guidelines specified by the Family Rights and Privacy Act. *[Note to student: Please read the reverse side of this form for instances where disclosure does not require prior consent.]*

Directory Information Includes:

1. Student Name
2. Student local address and telephone number
3. Student home address and telephone number
4. Student e-mail address
5. Current and past term status (full-time, part-time)
6. Classification (freshman, sophomore, etc.)
7. Academic unit
8. Major
9. Dates of attendance
10. Degrees and honors earned and dates
11. The most previous educational agency or institution attended prior to enrollment at Southern Illinois University
12. Participation in officially recognized activity or sport
13. Weight, height, and pictures of members of athletic teams
14. Date of birth
15. Picture

By signing this form, I understand that none of my information will be released and that the standard response will be that "we have no information on this person." This restriction becomes effective immediately after this form is processed. Anyone requesting information -- including myself (the student) -- will be denied access. There are no exceptions. The only way that I can obtain information is by submitting a request in writing with a hand-written signature or by coming to the Records Office with a photo ID. To have this restriction removed, I must submit a request in writing with a hand-written signature.

Signature: _____ Date: _____
 Student Hand-Written Signature (in cursive) is required Today's Date is required

This form may be faxed to Attn: RECORDS OFFICE at 618-453-2915 or mailed to the address listed at the top of this form. *(Note to Student: Please keep a copy of this form for your records.)*

For Office Use Only

Date Received: _____ Date Processed: _____

Processed By: _____

The following is an excerpt from the “Policy on the Release of Student Information and Access to Records at Southern Illinois University Carbondale.”

Section III A. Disclosure not requiring prior consent

1. The appropriate recordkeeping office shall obtain the written consent of the student before disclosing personally identifiable information from the records of a student, except in the case of directory information or disclosures to:

- a. The student himself/herself.
- b. University personnel who have a legitimate educational need to permit their functioning or research. The sufficiency of the need will be determined by the head of the unit from which the records are sought. Student information supplied to any Southern Illinois University personnel or unit is provided on the basis that it is needed to permit their necessary functioning. All members of the faculty, administration, and clerical staff must respect confidential information about students they require in the course of their work. They are bound by the conditions outlined in this policy statement relative to the release of student information. All institutional personnel should be alert to refer promptly to the appropriate office requests for transcripts, certifications, or other information which that office typically provides. They should restrict their responses to acknowledging, when appropriate, the receipt of requests for student information germane to their sphere of responsibility.
- c. Officials of other schools or school systems in which the student seeks or intends to enroll, if there is a legitimate need. The sufficiency of the need will be determined by the head of the unit from which the records are sought. A copy of any information sent will be provided to the student upon request.
- d. Faculty or students conducting student characteristic research providing the research project has written approval of the academic unit executive officer sponsoring the research and providing guarantees are made that no personally identifiable information will be published or released.
- e. Certain state and federal representatives specified by law for the sole purpose of evaluating and auditing of governmentally funded programs in which the University participates, with the guarantee that the identity of the students will be protected.
- f. State and local officials as directed by the State Statute adopted prior to November 19, 1974, as approved by University Legal Counsel.
- g. Organizations conducting studies for, or on behalf of, state or federal educational agencies or institutions for the purpose of developing, validating, or administering predictive tests, administering student aid programs, and improving instruction, with the guarantee that the identity of the student shall be protected.
- h. In connection with financial aid for which the student has applied or received.
- i. Accrediting organizations to carry out their accrediting function, with the guarantee that the identity of the student shall be protected.
- j. Appropriate persons in connection with an emergency, if knowledge of such information is necessary to protect the health or safety of a student or other persons.
- k. Comply with a judicial order or subpoena, but the University should make a reasonable effort to notify the student first. The sufficiency of the order or subpoena will be determined by the University Legal Counsel and that office shall send the required notice to the student.