



**Return to:** Pennsylvania College of Technology  
Registrar's Office, DIF 114  
One College Avenue  
Williamsport, PA 17701-5799

The following is considered "Directory Information" at Pennsylvania College of Technology and will be made available to the general public unless the student notifies the Registrar's Office in writing.

Student's name, address (*local, home, and electronic mail*), telephone number, date and place of birth, major, participation in officially recognized activities and sports, weight/height (*athletic teams*), date(s) of attendance, enrollment status (*full-time, part-time*), grade level (*freshman, sophomore, junior, or senior*), date of graduation, degrees, honors, and awards received, and most recent educational institution attended.

Under the provisions of the Family Education Rights and Privacy Act of 1974, you have the right to withhold disclosure of such directory information. Filing this form will preclude the College from releasing directory information to anyone without written consent.

Please consider carefully the consequences of any decision to withhold such directory information. Should you decide to inform Pennsylvania College of Technology not to release any of this information, any requests for such information will be refused by Pennsylvania College of Technology.

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***I, the undersigned, have read this form carefully and understand the consequences of my decision to prevent release of directory information.***

***I understand that this signed document:***

- a. prohibits Pennsylvania College of Technology from acknowledging any information regarding my enrollment to any third party including employers, loan deferments, and requests from non-institutional persons/organizations.
- b. suppresses information published to the Web.
- c. does not prevent disclosure to personnel within the College or in compliance with lawfully issued subpoena.
- d. is applicable until such time as I request that it be removed, and that I must initiate this option by filing a "Request to Release Directory Information" form with the Registrar's Office.

Date \_\_\_\_\_

Student ID Number \_\_\_\_\_

Print Student Name \_\_\_\_\_

Student Signature \_\_\_\_\_