

NON-DISCLOSURE DIRECTORY RELEASE FORM

NAME _____ V# _____
Last First M

Under the provisions of the Family Educational Rights and Privacy Act of 1974, you have the right to withhold the disclosure of all categories of "Directory Information" as described in the Victoria College catalog.

Victoria College Directory Information

Please select the information below that you would like withheld from disclosure:

- Name
- Address
- Telephone Number
- Date of Birth
- Major
- Dates of Attendance
- Degrees and Certificates Awarded
- Honors and Awards
- Full and Part-Time Status
- Enrollment and Withdrawal Classification
- Student Classification
- Most Recent Previous Institution Attended
- All the Above

Victoria College will honor your request to withhold this directory information; however, regardless of the effect upon you, the institution assumes no liability for honoring your instruction that such information be withheld.

This request must be filed with the Admissions and Records Office in order for directory information to be withheld.

Signature _____ Date _____

Semester/Year _____