



Office of The Registrar

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CONFIDENTIALITY OF STUDENT INFORMATION

Students have the right to consent to or deny disclosure of personally identifiable information contained in the student education records, except to the extent that Family Education Rights and Privacy Act of 1974 (FERPA) authorized disclosure without consent. One exception that permits disclosure without consent is disclosure to school officials with a legitimate education interest. Further, upon request, the College discloses education records without consent to an official of another school in which a student seeks or intends to enroll at.

Massachusetts Bay Community College has designated the following student information as "Directory Information" and as such may be released without your written consent at the discretion of the College. Under The provisions of FERPA, as amended, you have the right to withhold the disclosure of any or all of the designated information.

Check-mark the item(s) you do not wish to be as "Directory Information". However, please consider very carefully the consequences of any decision by you to withhold and "Director Information". Should you decide not to release this "Directory Information", any future requests for such information from non-institutional persons or organizations will be refused.

- | | | |
|--|--|---|
| <input type="checkbox"/> Student Name | <input type="checkbox"/> Mailing & Permanent Address | <input type="checkbox"/> City of Residence |
| <input type="checkbox"/> Electronic Mail Address | <input type="checkbox"/> Telephone Number(s) | <input type="checkbox"/> Date & Place of Birth |
| <input type="checkbox"/> Awards including Dean's List | <input type="checkbox"/> Full/Part Time Status | <input type="checkbox"/> Major/Program of Study |
| <input type="checkbox"/> Semester of Attendance | <input type="checkbox"/> Currently Enrolled or Not | <input type="checkbox"/> Photograph |
| <input type="checkbox"/> Date of Actual or Expected Graduation | <input type="checkbox"/> Honors, Degrees, or Certificate Awarded | |
| <input type="checkbox"/> Participation In Officially Recognized Activities and Sports Sponsored by The College | | |
| <input type="checkbox"/> Weight and Height of Athletic Team members | | |

FOR OFFICIAL USE ONLY

Date received in office:

Date recorded in system:

Received by:

Processed by:

The College will honor your request to withhold any of the items listed above but cannot assume responsibility to contact you for subsequent permission to release them. Regardless of the effect upon you, the College assumes no liability for honoring your instructions that such information be withheld.

This form must be received in The Registrar's Office within the first two weeks of each semester to be valid, otherwise, it will be assumed that the above information may be disclosed for the remainder of the academic year.

I have read the above and request that my personal information given to Massachusetts Bay Community College

NOT be released to a third party unless I have given a written and signed release **MAY BE** disclosed at the discretion of the College

Student Name _____

Student Signature _____ Date _____

Note: Information regarding FERPA rules and regulations can be obtained at The Registrar's Office