



Instruction to Withhold the Release of Directory Information

Name: _____

Former Name(s): _____

Student Identification Number: _____ Date of Birth: _____

Address: _____
City State Zip

As a current or former student of Lakeshore Technical College, Cleveland, Wisconsin, and being 18 years of age or older, I hereby exercise my right under the Family Educational Rights and Privacy Act of 1974 that the release of the following categories of directory student information be **withheld** until such time I revoke this instruction to withhold information.

By this, I am instructing LTC to **withhold** the release of the following information. If I have checked any of the following categories, that information will be withheld from release.

- | | |
|--|--|
| <input type="checkbox"/> Name | <input type="checkbox"/> Photos and videos of students for use in college presentations/
displays, news releases, publications and websites |
| <input type="checkbox"/> City of residence | <input type="checkbox"/> Dates of attendance/enrollment |
| <input type="checkbox"/> Student Email address | <input type="checkbox"/> Degrees, honors and awards received, including selection to a
dean's list or honorary organization |
| <input type="checkbox"/> Field of study | <input type="checkbox"/> Current enrollment status |
| <input type="checkbox"/> Most recent educational
institution attended | |

I understand that I may revoke this instruction to withhold at any time by declaration in writing, which will be effective upon delivery to Student Services at LTC. I understand the withholding of all information pursuant to this instruction prior to receipt of revocation by LTC is authorized. Unless I revoke this instruction, this instruction to withhold will remain in effect.

Signature of Subject of Record _____ Date _____

Signature of LTC Representative _____ Date _____