Request for Confidentiality



100 Institute Road, Worcester, MA 01609 Ph: (508)-831-5211 Fax: (508)-831-5931

Under the provisions of the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, students have the right to restrict the disclosure of any or all of their Directory Information.

To do so, students must complete this Request for Confidentiality form and submit it to the Registrar's Office during the first week of the fall semester/A term. A request to restrict the disclosure of Directory Information does not restrict internal use of such by WPI.

"Directory Information" for each student are: campus mailbox, full name, year, major, advisor, e-mail address, permanent address, local address, local phone, photograph, date and place of birth, dates of attendance, enrollment status, degrees and awards received, and most recent or previous educational agency or institution.

• ALL DIRECTORY INFORMATION RESTRICTED - I do not to permit disclosure of ANY of my Directory Information

• CERTAIN DIRECTORY INFORMATION RESTRICTED - I do not to permit disclosure the following Directory Information (please specify):

I understand that by choosing the option above that my Directory Information will not be disclosed to third parties and thus will not be included in the dean's list and the commencement program.

NOTE: Request for Confidentiality can be rescinded at any time by written request of the student.

SIGNATURE ID#: