

FERPA OPT-OUT FORM

Student Records Policy v. 3.0 (FERPA Opt-out v. 1.1) 4/20/12
International University of Leaderships Student Records Policy
Directory Information Opt-Out Form

Name:

Student ID #

Date of Birth:

(MM/DD/YYYY)

NOTICE OF DIRECTORY INFORMATION

In accordance with the Family Educational Rights and Privacy Act (FERPA), the Student Records Policy requires International University of Leadership to keep a student's Educational Records confidential, subject to certain limited exceptions. Subject to those exceptions, the University will not release such Education Records, or information derived from them, to a third party, without first obtaining the student's written consent.

FERPA, however, does allow the university to release student "directory information" without obtaining the prior consent of the student.

International University of Leadership defines "directory information" as the following:

- Student name, address, telephone number, student number
- Email address
- Date and place of birth
- Major field(s) of study
- Participation in officially recognized activities and sports
- Dates of attendance
- Degrees, honors and awards received
- Most recent previous school attended and
- Student likeness (photograph, video or other form).

If you do not want the university to release your directory information without you prior consent, you may choose to "opt-out" of this FERPA exception by signing below and submitting this form electronically. Upon receipt, your directory information will not be released from the time of receipt going forward; if directory information is released prior to the Registrar receiving your written opt-out request, the university may not be able to stop the disclosure of directory information. The "opt-out" will not apply when the University is required by law or permitted under FERPA to release such directory information without your prior written consent.

By entering my name and selecting YES to the "Submit & Sign Online" button below, I indicate that I have completed the above information and I agree that this electronic submission will serve and act as my official and legally binding signature to this document.

Submit & Sign

Name

Sign

Date (.../.../.....)

Parent/guardian signature if the student is under 18.

Parent Name

Sign

Date (.../.../.....)