

WESTERN ILLINOIS UNIVERSITY

EXCLUSION OF DIRECTORY INFORMATION FORM

TO: Office of the Registrar

FROM: \_\_\_\_\_  
(print: student's name)

I am requesting the University withhold the release of directory information from public question and/or view. Directory Information as defined by Western Illinois University

- includes:
- Student's name
  - School & Home addresses
  - Telephone numbers
  - Dates of attendance
  - Full- or part-time status
  - Major field of study
  - Degree and awards received
  - Honors received (includes Dean's List)
  - Most recent educational agency or institution attended
  - Participation in officially recognized activities & sports
  - Weight and height of member of athletic team

I understand that this request for nondisclosure will be honored indefinitely and does not affect directory information already published or released. If I would like to reverse this action and have the Privacy Act Exclusion taken off my records, I need to contact the Office of the Registrar in writing.

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Student ID#

\_\_\_\_\_  
Date

**Include a copy of your driver's license or WIU ID card when mailing or faxing this request form.**