



**OFFICE of THE REGISTRAR**

Elizabeth City State University | 1704 Weeksville Road  
Elizabeth City, NC 27909 (252) 335-3300

---

**REQUEST FOR NON-DISCLOSURE OF DIRECTORY INFORMATION**

At its discretion, Elizabeth City State University may provide *directory information* in accordance with the provisions of the *Family Educational Rights and Privacy Act (FERPA)*. Directory information means information in a student’s education record that would not generally be considered harmful or an invasion of privacy if disclosed. ECSU recognizes the following as directory information: a student’s name, local and permanent address, photograph, email address, telephone number, enrollment status, date and place of birth, major field of study, dates of attendance, honors, degrees and awards (including scholarships) received, participation in officially recognized activities, organizations and sports, weight and height of members of athletic teams, and the most recent previous educational agency or institution attended. Directory information shall not include a student’s social security number or student identification number.

Students may withhold directory information by completing this form and submitting to the Office of the Registrar. Note that this withholding request is binding for all information to all parties other than for educational purposes. Students should consider all aspects of a *directory hold* prior to filing this request. Although the initial request may be filed at any time, requests for non-disclosure will be honored by the University until removed by the student.

Please consider very carefully the consequences of any decision by you to withhold directory information. Such designation will call for Elizabeth City State University not to release any of this directory information. Any future requests for such information from non-institutional persons or organizations will be refused.

Elizabeth City State University cannot assume responsibility to contact you for subsequent permission to release information. The Family Educational Rights and Privacy Act (FERPA) protect the privacy of student education records. ECSU may provide access to a student’s education records to a third party only as provided in FERPA and ECSU policy or if the student provides written consent using this form. Regardless of the effect upon you, Elizabeth City State University assumes no liability as a result of honoring your instructions that such information be withheld.

Your signature indicates to Elizabeth City State University that you understand and are willingly requesting directory information to be withheld from all third party requestors outside of Elizabeth City State University.

\_\_\_\_\_   
Date

\_\_\_\_\_   
Student Name

\_\_\_\_\_   
Banner ID

\_\_\_\_\_   
Student Signature