



## Non-Disclosure of Public Information

### Directions:

Please complete this form to request Central Lakes College to refrain from sharing Directory Information with 3<sup>rd</sup> parties. Directory information is public data unless you request any of this data to be treated private. For more information regarding student data privacy, please see CLC policy 3.2.1. If you request that we withhold your directory information, all requests for information from non-institutional persons or organizations will be refused without your written authorization, **except where required by law**. For example, the college would be unable to verify degree, major or enrollment for possible employment, loan deferment, insurance eligibility, home mortgage applications, and apartment leases, etc., unless the request is accompanied by your signed, dated release. Central Lakes College cannot assume responsibility for contacting you for this authorization, nor can we accept liability for honoring your request that such information be withheld. Your request to withhold your directory information will remain in effect until you inform us in writing to rescind it.

### Student Information

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

SSN or Tech ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Directory Information Non-Disclosure Request:

- 1 Do not release personal Directory Information, this includes, but is not limited to: Student's name, addresses (local or permanent), telephone number, email address, hometown
- 2 Do not release academic Directory Information; this includes, but is not limited to: Date of graduation, major field of study, enrollment status (i.e., enrolled, withdrew, full-time or part-time), degrees, honors and awards received, dates of attendance, participation in officially recognized activities and sports, height and weight of athletes, photograph (stills or motion)
- 3 Please rescind my previous non-disclosure request, you are free to release my Directory Information as appropriate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **CLC Contact Information:**

### **CLC Brainerd Campus**

501 West College Drive  
Brainerd, MN 56401-3900  
1-800-933-0346 or  
218-855-8000  
Fax: 218-855-8269  
[askclc@clcmn.edu](mailto:askclc@clcmn.edu)

### **Staples Campus**

1830 Airport Road  
Staples, MN 56479-3252  
1-800-247-6836 or  
218-894-5100  
Fax: 218-894-5185  
[askclc@clcmn.edu](mailto:askclc@clcmn.edu)