

Jefferson Community College

Information Release Restrictions

**As provided for under the Family Education Rights and Privacy Act of 1974,
I, _____, Student ID Number _____, officially
request that the categories of information checked below not be released to the public without my
permission.**

- | | |
|---|---|
| <input type="checkbox"/> Name | <input type="checkbox"/> Dates of Attendance |
| <input type="checkbox"/> Local Address | <input type="checkbox"/> Major |
| <input type="checkbox"/> Permanent Address | <input type="checkbox"/> Classification |
| <input type="checkbox"/> Addresses for Mail Lists | <input type="checkbox"/> Degrees Awarded |
| <input type="checkbox"/> Telephone Number | <input type="checkbox"/> Honors |
| <input type="checkbox"/> Sex | <input type="checkbox"/> Awards |
| <input type="checkbox"/> Race | <input type="checkbox"/> Previous Institution Awarded |
| <input type="checkbox"/> Nationality | <input type="checkbox"/> Photograph |
| <input type="checkbox"/> Date of Birth | <input type="checkbox"/> Weight/Height of Athlete |
| <input type="checkbox"/> Place of Birth | <input type="checkbox"/> Sports Participation |
| <input type="checkbox"/> Parents' Name | <input type="checkbox"/> Parking Permit Information |
| <input type="checkbox"/> Parents' Address | <input type="checkbox"/> Judicial Information |
| <input type="checkbox"/> Class Schedule | <input type="checkbox"/> Enrollment Status |
| <input type="checkbox"/> E-Mail | |

Signature

Date