**Request to Withhold Directory/Limited Directory Information**

Hibbing Community College
Student Services Offices
1515 East 25th Street
Hibbing, MN  55746
1-800-224-4422 or 218-262-7200
Fax: 218-263-2992

**Directory/Limited Directory Information**

Hibbing Community College designates the following as Directory Information: Student name, address, telephone number, date and place of birth, full-time, part-time, grade level, major field of study, participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, degrees and awards received, most recent previous school attended and photographs (stills or motion). The College may disclose any of those items without prior written consent, unless notified in writing to the contrary. HCC designates the following as Limited Directory Information: StarID and e-mail address.

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, you have the right to request HCC withhold your directory information. HCC will continue to release information about you as dictated by federal and state laws.

Notwithstanding any other provision of the policy, the following information is defined as Limited Directory Data for purposes of sharing with LeadMN so the association can communicate with their members. Student name, e-mail address, and Student Change Code (NEW/RTN/DROP).

**Implications of Withholding Your Directory/Limited Directory Information**

If you request that we withhold your directory/limited 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. Hibbing Community College cannot assume responsibility for contacting you for this authorization, nor accept liability for honoring your request that such information be withheld.

Students who wish to restrict their names should realize that their names will not appear in the commencement program, on the Dean’s List and other HCC publications.

Your request to withhold directory information will remain in effect until you inform us in writing of your wish to rescind it or until ten years after your death.

**Authorizing the Release of Information**

During the time your request is in effect, you must authorize, on a transaction-by-transaction basis the release of information (for example, the release of enrollment verification or a college transcript) Authorization is submitted in the form of a signed and dated request.

<table>
<thead>
<tr>
<th><strong>Withhold Directory/Limited Directory Information</strong></th>
<th><strong>Release Directory/Limited Directory Information</strong></th>
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</thead>
<tbody>
<tr>
<td>I wish to prevent the disclosure of my directory information and I understand the implications of doing so, as described above.</td>
<td>I no longer wish to prevent the disclosure of my directory information.</td>
</tr>
<tr>
<td>Name(print): ____________________________________</td>
<td>Name(print): ____________________________________</td>
</tr>
<tr>
<td>Student ID# or Star ID: __________ Date___________</td>
<td>Student ID# or Star ID: __________ Date___________</td>
</tr>
<tr>
<td>Signature: ______________________________________</td>
<td>Signature: ______________________________________</td>
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<tr>
<td>From the date this form is received, the Records/Registrar’s Office will honor your request to withhold your directory information.</td>
<td>From the date this form is received, the Records/Registrar’s Office will honor your request to release your directory information.</td>
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</tbody>
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**Please return this form to the Records/Registrar’s Office at Hibbing Community College**