



University of New Haven

Request to Withhold Directory Information

For more information about how directory information is used, please visit
<https://www.newhaven.edu/about/departments/registrar/ferpa/directory-information.php>

Student Name _____

University ID number _____

I hereby request that the University of New Haven not make public the following directory information from my record (check all that apply):

- Name
- Local address
- Permanent address
- Email address
- Telephone number
- Date of birth
- Place of birth
- Major
- Student activities (including athletics)
- Height and weight (athletic team members only)
- Dates of attendance
- Date of graduation
- Degrees, honors, awards received, and where received
- Most recent educational institution attended
- Photographs
- Names and addresses of parents, guardians, or spouses

This request to withhold directory information will become effective on the day it is received by the Office of University Registrar. It shall remain in effect until it is otherwise revoked by me, in writing, to the Office of University Registrar.

Student Signature _____ Date _____

Return to the Office of the University Registrar

On-Campus: Bring to the One Stop, located in Bergami Hall

U.S. Postal Service: Office of the University Registrar, 300 Boston Post Road, West Haven, CT 06516