

**REQUEST TO PREVENT/RESTORE DISCLOSURE OF
DIRECTORY INFORMATION (FERPA)
OPT IN/OPT OUT FORM**

**WESTFIELD STATE UNIVERSITY
OFFICE OF THE REGISTRAR**

Under the provisions of the Family Educational Rights and Privacy Act of 1974, as Amended, (FERPA), and the University's Student Records and Privacy Regulations, you have the right to withhold the disclosure of "Directory Information," as defined by Westfield State University:

- student's legal name
- home town
- campus email address
- major field of study
- participation in officially recognized activities and sports
- dates of attendance
- degrees and awards received
- enrollment status (full time or part time)

Please consider very carefully the consequences of any decision to withhold "Directory Information." Should you decide to prevent this Directory Information from being released; any future requests from non-institutional persons or organizations will be refused. This includes potential employers who want verification of your degree(s) and/or dates of attendance as well as press releases concerning University awards or activities. The University will not be able to tell anyone anything about your status.

The institution will honor your request to withhold the Directory Information but cannot assume responsibility to contact you for subsequent permission to release Directory Information. Regardless of the effect upon you, the institution assumes no liability for honoring your instructions that such Directory Information be withheld. WSU retains the right to report your enrollment status for federal, state or other official reporting requirements as required by law and are legally allowable exceptions outlined in the FERPA and University policies.

Below, please check the appropriate option, sign, and return this form to the Office of the Registrar, Scanlon Hall, 2nd floor. If you are requesting that we do not release Directory Information, Westfield State University strongly recommends that when you graduate, you file this form to remove this restriction, so that we can confirm your degree for outside inquiries, such as for employment and graduate studies.

Check one: I wish WSU to ☐ prevent disclosure of Directory Information
☐ restore disclosure of Directory Information

STUDENT ID: A _____

Printed Name: _____

Student Signature: _____ **Date:** _____

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**OFFICIAL USE ONLY**

**Updated Student SPAPERS Record:** \_\_\_\_\_  
Name and Date

Rev 08/2025