FERPA Directory Information Block
Request Form

I, the undersigned, request that SUNY Orange install a FERPA Block on my Directory Information, preventing the release of any directory information about me, except where permitted or required under FERPA.

Student's Full Name: _____

ID #: _____

Student's Local Address:

_____

_____

Student's Local Phone:

_____

Student's Signature: _____

Today's Date: _____

NOTE: **Must be submitted in person with Picture ID or if mailing/faxing submit with a photocopy of Picture ID along with it.**

Fax Number: 1-845-342-8662

NOTE: **This Block remains on the student's record until they request its removal through the FERPA Block Removal Request Form**

. . . .

To be completed by Institution:

Action Taken:
Date:
By:
Comments: