

REQUEST FOR NON-DISCLOSURE OF INFORMATION

Student Information:					
	Student ID # or Social Security Number (last 4 digits)				
Student's Name (Last) (Fi	irst)	(Middle) (F		Previous)	
Address (Street)	(City)	(Si	tate)	(Zip)	
Primary Phone Number	Secon	dary Phone Number			
disclosure to unauthorized individuals. However Information to the public. Such information in a student name and address • major field of study and degree sough • degrees and awards received • participation in officially recognized a emost recent previous educational age efull or part time enrollment status and edates of attendance • expected date of completion of degree	cludes: nt or completed activities and sportency or institution d student classifica	s attended by the stu ation (freshman or	udent	,	
Your request for non-disclosure (privacy block) from any public dissemination of information a must understand that withholding directory in graduation to potential employers, publishing Review the full policy in the Student Handbook	about Northampto formation prevent the student's nam	n Community Colle s the College from e in a graduation p	ge stude verifying rogram	ents. Students g attendance or or dean's list.	
☐ ADD the privacy block on my record					
☐ REMOVE the privacy block from my record	i				
(handwritten signature only)					
Signature of Student		Date			
Records Office □ 3835 Green Pond Road □ Beth	nlehem, PA 18020	fax: 610-861-5551	□ record	d@northampton.edu	

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