

Contact Information Release Form

Federal and state law permits Radford University to release information it has identified as directory information with respect to each student unless the student informs the University that all designated directory information should not be released without the student's prior consent. Forms to request a restricted release of directory information are available [here](#) and turned in to the Registrar's Office.

While the University understands that there are sometimes very legitimate reasons why a student may want to restrict their directory information, please note that placing a restriction on the release of a student's directory information means that RU personnel can't even acknowledge the existence of the student to a third party such as prospective employers, graduate or professional schools, or loan servicers. This may cause the student and their parents some inconveniences related to the verification of enrollment and/or graduation for insurance, student loan deferment, and employment purposes.

Radford University has identified the following as directory information:

- Student's name, date-of-birth, local and home address, phone numbers, and e-mail addresses
- Whether a student is currently enrolled
- 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

While FERPA stipulates that universities may disclose directory information to third parties without the student's consent, they are not required to do so. It is Radford University's policy to refrain from disclosing student addresses, telephone numbers, email addresses, and dates-of-birth without the student's consent; however, the University may use this information for verification purposes. A student can, however, authorize the University to disclose their contact information (addresses, telephone numbers, and email addresses) by completing and turning in this form to the Registrar's Office. Students can revoke this authorization at any time.

A. Authorization:

_____ I authorize Radford University to disclose my contact information (addresses, telephone numbers, and email addresses) to any third party who requests it.

_____ I revoke my authorization to Radford University to disclose my contact information (addresses, telephone numbers, and email addresses) to any third party who requests it.

B. **Student Information:** _____
Name (Last, First, Middle Initial) Student ID Number

C. **Signature:** _____
Student's Signature Date