



Name: _____

Date: _____

I request that information concerning me not be released to anyone other than Platt College school officials and staff who have legitimate educational interests. Filing of this form will not cause Platt College to discontinue verification of enrollment to lending agencies.

I understand that this request is valid until I sign a form to cancel the request. In the event that I desire to have directory information released, I must request and complete a *Cancellation of Request for Non-Release of Directory Information* form.

Student's Signature

For Office Use Only:

Date Entered _____
Staff Initials

Date Removed _____
Staff Initials

cc: Student