The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records. Under FERPA, EVMS may, at its discretion, release “Directory Information,” without a student’s consent, to any 3rd party that makes a request. Directory Information is defined as data or information that would not generally be considered harmful or an invasion of privacy if disclosed. EVMS has designated the following as Directory Information: student name, telephone number, EVMS e-mail address, degrees or certificates sought and/or conferred, program/class year, dates of attendance, awards and honors received, enrollment status, photograph, and name of the most recent previous educational institution attended.

If you do not wish for such information to be disclosed, you may place a Directory Hold on any or all of your Directory Information items by completing the form below and returning it to the Office of the Registrar (in person with a photo ID) within ten (10) business days of the start of any new or renewal term. **Students should carefully consider the consequences of any decision to place a Directory Hold on Directory Information prior to filing such a request.** **A Directory Hold will suppress campus Directory Information and will not allow EVMS to acknowledge your enrollment to any 3rd party without your specific authorization. This may include information needed for loan deferrals, credit card companies, scholarship committees, inquiries from a prospective employer. Further, your information will not be printed in the EVMS Commencement Program or any other external information directory.**  Note also that if you elect to place a hold on any or all information, EVMS will honor your request and will not contact you for subsequent permission to release the information. EVMS assumes no liability as a result of honoring your instructions that such information be withheld.

**The Directory Hold will be honored by EVMS until rescinded by the student, in writing.**

I have carefully read the above and request that EVMS place a Directory Hold on my Directory Information as follows:

Check any of the below you wish to be withheld – all other information may be released

\_\_\_\_\_ Student Name \_\_\_\_\_ Telephone Number

\_\_\_\_\_ Enrollment Status \_\_\_\_\_ Degrees or Certificates Sought and/or Conferred

\_\_\_\_\_ Program/Class year \_\_\_\_\_ Dates of Attendance

\_\_\_\_\_ Awards and Honors Received \_\_\_\_\_ Photograph

\_\_\_\_\_ Name of the Most Recent Previous Educational Institution Attended.

\*Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Program/ Class Year \_\_\_\_\_\_\_\_\_

\*Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Required

Bring this form with Eastern Virginia Medical School

a photo ID to: Office of the Registrar, Lewis Hall, Room 1147

700 West Olney Road

Norfolk, VA 23507