

Confidential Student Block Request Form

I, the undersigned, request that Dutchess Community College install a Confidential Student 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 #: A	
Student's Local Address:	
Student's Local Phone:	
Student's Signature:	
Today's Date:	
NOTE: This Block remains on the student's record until they request its removal through the "Confidential Student Block Removal Request Form" If you are submitting this form in person with government issued I.D., please stop here.	
STATE OF NEW YORK: COUNTY OF:	
personally known to me or proved to me on the basis of satisfactor	perfore me, the undersigned, personally appeared, by evidence to be the individual(s) whose name(s) is(are) subscribed to the within instrument and citylitheir capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the instrument.
Please complete this form and return to the Registrar's Office Dutchess Community College	ce:
53 Pendell Road – SSC 201 Poughkeepsie, NY 12601 Attn: Registrar's Office	Notary Signature
Email: registrar@sunydutchess.edu Fax: 845-431-8983	8/16/17
**FOR OFFICE USE ONLY: ID Verified By: Banner Entered By:	
Date:	