

## STUDENT INFORMATION SUPPRESSION REQUEST

For students who are admitted to Georgia State University and have registered for classes, if you wish to request suppression or to release a previous suppression request of all access and publishing of your directory information including but not limited to the published Georgia State University directory, please complete this form.

Georgia State University has designated the following types of information to be directory information: student name, addresses, e-mail address, telephone number, date and place of birth, major field of study, full or part-time status, participation in officially recognized activities and sports, degrees and awards applied for and/or received, dates of attendance, previous educational institutions attended by the student, photographs and other recorded images, and, with respect to members of athletic teams, height, weight, age, hometown, hobbies, and general items of interest.

NOTE: A request for information suppression prevents potential employers from verifying degrees

earned and dates of enrollment. Please check the appropriate box as per your request. I want my information suppressed. I no longer want my information suppressed. Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ Please allow 5 to 7 business days processing time upon receipt at the Office of the Registrar. The effective date for the suppression request will be the day after the processed date. Information previously released or published prior to the suppression date may not be retracted. Return this completed and signed form in person to the Enrollment & Registration Services Center at your campus. OR Fax this form along with a copy of the Panther ID or a valid photo ID to the Academic Records Department at 404-413-2220 Internal Use ONLY: In Person Fax Received Date: \_\_\_\_\_ Staff Unit and Initials \_\_\_\_\_ Processed Date: \_\_\_\_\_ Staff Unit and Initials \_\_\_\_\_