



Continuing Education Registrar's Office
447 College Drive • Sylva, NC 28779

REVOCATION OF PRIOR INFORMATION RELEASE REQUEST

The purpose of this form is to make changes to any previous release of information requests. Use this form if you have previously submitted a form to:

- a. authorize the release of protected information to a third party and wish to revoke that release or
- b. prohibit the release of directory information and wish to revoke that prohibition

Upon completion of this form, please submit it to the Registrar's Office in person, by mail or by email.

Student Information:

Name (Last, First Middle)

Student SCC ID#

Mailing Address (Street/PO Box, City, State, ZIP)

Telephone Number

Action (Select One):

- ☐ REVOKE PROHIBITION OF RELEASE OF DIRECTORY INFORMATION: I hereby request that Southwestern Community College revoke all previous requests from me to prohibit the release of my directory information. I understand that this revocation allows SCC to treat my directory information as public information.
- ☐ REVOKE THE RELEASE OF INFORMATION TO A 3RD PARTY: I hereby request that Southwestern Community College revoke the previous request to release protected information to the following third party.
Name: _____

Certification:

Signature of Student

Date