

GWYNEDD-MERCY COLLEGE  
P.O. Box 901  
1325 Sumneytown Pike  
Gwynedd Valley, PA 19437

**Written Notification by Student to Hold Directory Information**

I \_\_\_\_\_ request that *Gwynedd-Mercy College* not disclose the  
(print full name)  
following directory information for the academic year beginning \_\_\_\_\_  
(today's date)

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

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Check each that applies:

- 1) \_\_\_\_\_ Name
- 2) \_\_\_\_\_ Address
- 3) \_\_\_\_\_ Major field of study
- 4) \_\_\_\_\_ Dates of attendance
- 5) \_\_\_\_\_ Degrees and awards received
- 6) \_\_\_\_\_ Full/Part Time Status
- 7) \_\_\_\_\_ Participation on officially recognized activities & sports
- 8) \_\_\_\_\_ Weight and height for members of athletic teams

**The College will honor each request to withhold any of the categories of information listed above but cannot assume responsibility to contact you for subsequent permission to release them. Decisions about withholding any information should be made very carefully. Any requests made from non-institutional persons or organizations within 1 year of this signed document will be refused.**