



Office of the Registrar

Henry Administration Bldg, Suite 1200
14000 Jericho Park Rd, Bowie, MD 20715
P 301-860-3730
F 301-860-3438

OPT-IN
FERPA DIRECTORY INFORMATION

Instructions: This form should be used if you have previously completed a FERPA directory Opt-Out Form and would like to allow Bowie State University (BSU) to disclose FERPA "directory information" as outlined below. You must complete and submit this form to the Office of the University Registrar.

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. Students have the right to consent to disclosure of information contained in their education records, except to the extent that FERPA authorizes disclosure without consent.

Under FERPA, Bowie State University may release certain information designated as "directory information" to third parties without your consent, unless you have specifically asked Bowie State University not to do so. **At Bowie State University, FERPA "directory information" includes:**

- Name
- School and Home Address
- Photograph
- Date and place of birth
- Email Address
- Telephone number
- Dates of attendance
- Major field of study
- Degrees and awards received
- Enrollment status (full-time, half-time, classification.)
- Previous educational institutions attended
- Participation in officially recognized activities (including social, honorary fraternities, sports, etc.)
- Height and weight if a member of an athletic team

You should consider very carefully the outcome of opting-in to sharing FERPA "directory information" which may include, without limitation, BSU providing your information to potential employers for recruitment purposes; alumni for mentoring and networking opportunities; publications for honors and awards; disclosure of information in commencement program or commencement announcements; registration and enrollment data; or certain interest or affinity groups for informational mailings. With your specific written consent, University officials will be able to verify your enrollment status or degree received, unless the disclosure would otherwise be permitted by another exception under FERPA. If you agree, please complete the information below.

Student Name: _____ Student ID Number: _____

Student Signature: _____ Date: _____

