

Northeastern Oklahoma A&M College
Request to Keep Directory Information Confidential
(for currently registered students)

Please return the completed and signed form to the Admissions/Registrar's Office at 200 I Street NE Box 3843, Miami, OK 74354; 918-542-9759 (fax) or neoadmission@neo.edu.

Print Name: _____ CWID: _____
(Last) (First) (MI)

Email: _____ Phone #: _____

Please mark the information you do NOT want to be released as "directory" information to third parties:

- Name of student
- Local address and zip code
- Local telephone number
- Email address
- Major field of study
- Educational level (freshman or sophomore)
- Dates of attendance
- Enrollment status (full-time or part-time)
- Degree awarded
- Dean's or President's Honor Roll
- Most recent educational institution attended
- Participation in officially recognized activities and sports
- Personal statistics for members of athletic teams (height and weight)
- Photographs

To revoke this request, I must do so in writing.

Signature: _____ Date: _____

Registrar Use Only:

Date Received: _____

Date Processed: _____

Processed by: _____