



## **Privacy of Information Notification**

New Mexico Tech adheres to the provisions set forth by the Family Educational Rights and Privacy Act of 1974, as amended. Under the provision of this Act, the following policies apply:

1. If you are a currently enrolled student or former student, you may inspect your educational records by submitting an official request and obtaining an appointment to do so.
2. You may challenge inaccuracies or misleading items. However, you may not challenge the fairness of a grade under this provision.
3. Your record is not released without your written consent except to New Mexico Tech school officials with a legitimate educational interest. School officials are agents of the university in an administrative, supervisory, academic, research or support staff position; members of university committees, boards and/or councils; and persons under contract to the university to perform a specific task, such as an attorney or auditor. School officials have a legitimate educational interest in accessing or reviewing a student's educational records if they are:
  - Performing a task that is specified in his/her position description or contract
  - Performing a task related to a student's education or to student discipline
  - Providing a service or benefit relating to the student or student's family.
  - Maintaining safety and security on campus.

Other exceptions are to comply with a judicial order, or in an emergency involving the health or safety of a student or other person.

4. When a record is released, the recipient is notified by NM Tech that the record may not be released to a third party.
5. With the exception of disclosures to school officials, a record is kept of disclosures of personally identifiable information for which the student has not given written consent.
6. **Directory Information:** New Mexico Tech designates the following as directory information: name, student ID number, address, telephone number, dates of attendance, class, previous institution(s) attended, major field of study, awards and honors (includes honor roll), and degree(s) conferred (including dates). **You have the right to withhold the disclosure of directory information.** Any requests for such information from non-Tech persons or organizations will be refused. NM Tech will honor your request to withhold directory information but cannot assume responsibility to contact you for subsequent permission to release it. Regardless of the effect upon you, NM Tech assumes no liability for honoring your instructions that directory information be withheld. Should you wish for your directory information to be withheld, please complete the following form and return it to the Registrar's Office.

For more information please contact Sara Grijalva, Registrar,  
Joseph A. Fidel Center, Room 285, 575.835.5133.



## Request to Withhold Directory Information

### Directory Information:

New Mexico Tech designates the following as directory information: name, student ID number, address, telephone number, dates of attendance, class, previous institution(s) attended, major field of study, awards and honors (includes honor roll), and degree(s) conferred (including dates). You have the right to withhold the disclosure of directory information. Any requests for such information from non-Tech persons or organizations will be refused. NM Tech will honor your request to withhold directory information but cannot assume responsibility to contact you for subsequent permission to release your information. Regardless of the effect upon you, NM Tech assumes no liability for honoring your instructions that directory information be withheld.

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*I request that New Mexico Tech keep my directory information confidential. I understand that New Mexico Tech will not contact me if a third party (including an employer or graduate school) requests my directory information. It is my responsibility to notify New Mexico Tech if I would like my directory information released at a future time.*

Student Name (printed) \_\_\_\_\_

ID Number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this form to the Registrar's Office, Fidel Center 2<sup>nd</sup> Floor

**Office use:**  
**Date Received**

**Date Entered**

