



Asheville-Buncombe Technical Community College  
K. Ray Bailey Student Services Building  
340 Victoria Road  
Asheville, NC 28801  
(828) 398-7900

### Withdrawal of Previous Release of Information

Student ID#: \_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_ Student Name: \_\_\_\_\_

By signing below, I hereby request all previous authorizations allowing A-B Tech to release information to third parties be suspended until further notice. Information related to my student record, with the exception of directory information as defined by FERPA, is to be released solely to me, the student.

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

\_\_\_\_\_  
Date

- |  |
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| <p><u>Office Use Only</u></p> <ol style="list-style-type: none"> <li>1. Check photo ID (required; form must be submitted by student)</li> <li>2. Scan to Applications/4 Privacy</li> <li>3. Add electronic "Info Release Rescinded" stamp to original Release of Information form</li> </ol> |
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