



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

Request to Block Release of Directory Information

Student ID#: ____/____/____/____/____/____/____ Student Name: _____

I request Asheville-Buncombe Technical Community College not release information regarding my student record, including directory information, to anyone outside the College. This request replaces all previous authorizations or requests and is in effect from the date signed until I submit a revised request.

Student Signature

Date

Office Use Only

1. Check photo ID (required; form must be submitted by student)
2. In BIO, enter E in Privacy field.
3. Scan to Applications/4 Privacy