



Center for Health Sciences
College of Osteopathic Medicine

OFFICE OF THE REGISTRAR

1111 W 17TH ST
Tulsa, Oklahoma 74107
918-561-5469
chsregistrar@okstate.edu

REQUEST TO WITHHOLD DIRECTORY INFORMATION (BUCKLEY FORM)

This form must be submitted to the Office of the Registrar in person with appropriate ID (a valid driver's license, OSU Student ID, or passport), or it may be submitted by mail, fax or email along with a legible copy of appropriate ID.

Students may withhold disclosure of directory information by filing this written request with the Office of the Registrar. Please note that such withholding requests are binding for all information to all parties other than for educational purposes.

Students should consider all aspects of a directory information hold prior to filing such a request. This request will prevent Oklahoma State University from releasing any directory information, and any requests for such information from non-institutional persons or organizations will be refused (i.e., your name will not appear in the commencement program, we will not be able to confirm your degree to a prospective employer, etc.).

Directory information at OSU includes:

- Student's name, local and permanent address or hometown
- Telephone number
- Year of birth
- Major field of study
- Weight and height of student participating in officially recognized sports
- Dates of attendance at Oklahoma State University
- Degrees, honors, and awards granted or received and dates granted or received
- Academic classification such as freshman, sophomore, junior, senior, etc.
- Institutional electronic mail address
- Most recent educational institution previously attended
- Dissertation or thesis title
- Advisor or thesis/dissertation advisor
- Participation in officially recognized organizations, activities and sports
- Parents' names and addresses (city and state only)

Exclusions: Parents of dependent students, as defined by IRS standards, are excluded from this request for non-disclosure and may have access to their son's or daughter's educational record if they provide a copy of the most current Internal Revenue Form 1040. Student records are also accessible for selected other purposes, such as to members of the faculty and staff of the University who have a legitimate need to know their contents, to another institution to which the student is transferring, and in response to a lawfully issued court order or subpoena.

Student Name: _____ Student ID: _____
(last, first, middle)

Student Signature: _____ Date: _____

Student Phone:

This phone will be stored in a secure location and ONLY used by Registrar management to notify you in the event that a third party contacts our office asking for your information.

Registrar Staff Signature: _____ Date: _____

TYPE OF PHOTO ID PRESENTED:

☐ Driver's License

☐ OSU Student ID

☐ Passport