

Request to Inspect, Amend, or Destroy Student Educational Records**CHECK ONE:**

- ☐ Request to inspect and review educational records
- ☐ Request amendment of educational records
- ☐ Request hearing to challenge educational records
- ☐ Request destruction of records

Specify the educational record(s) _____

I hereby make the above request concerning the education records of

Student's Name

Date of Birth

I ☐ am ☐ am not satisfied with the accuracy of the record(s). I realize I may request that records which are inaccurate, misleading, or violative of other rights of the student be amended.

Describe below the specific information in the records for which amendment/hearing is requested and the reason for the request: _____

(USE BACK OF PAGE IF ADDITIONAL SPACE IS REQUIRED.)

I certify that I am the parent, legal guardian or am acting as a parent under FERPA of the student named above, or that I am at least 18 years of age making the above request concerning my own school records.*

Parent/Guardian's or Student's Signature

Date

* Living in the student's home in the absence of the parent on a day-to-day basis

You may review the records of _____ at _____
Student's Name Location

between the hours of _____ AM and _____ PM on _____
Month & Day Year

Failure to appear at the time and place designated above will require requesting party to make arrangements to view record(s) at an alternate time and place.

Custodian of Records/designee's Signature

Title

Date

NOTE: Except when individuals designated by the Superintendent are reviewing student records, an authorized school employee shall provide appropriate supervision while records are being inspected.

Review/Revised:7/7/2014