



Education Record Review Request

Student ID _____ Name (print) _____

I wish to review the education records listed below. I understand that the Registrar will make arrangements for access and will notify me of the time and place where the records may be reviewed. I understand that the Registrar or designee will be present during the review. If the requested records are not maintained by the Registrar, I ask that the Registrar advise me of the correct University official to whom the request should be addressed.

Signature (required) _____ Request Date _____

(Complete the section below after the records have been reviewed.)

I reviewed the education records listed above on _____, and:

I am satisfied with the accuracy and/or completeness of the records.

I am not satisfied with the accuracy/completeness of the records for the following reasons:

I understand that if I am not satisfied with the accuracy/completeness of the records that I have reviewed, I must submit a separate Request to Amend Education Records form in order to request changes related to any of the reasons listed above.

Signature (required) _____ Date _____