Inspect/Review Educational Records



Welcome and Registration Center7932 Opossumtown PikeFrederick, MD 21702Fax: (301) 624-2799Phone: (301) 846-2431

Student's request to inspect and review their educational records			
Name		Date	
Student ID #	_ Social Security #	[Date of Birth

The Family Educational Rights and Privacy Act of 1974 affords certain rights to students concerning their education records. One of the primary rights afforded is the right to inspect and review their education records within a maximum of 45 days after the request is submitted.

The right of inspection and review includes:

- The right to an explanation and interpretation of the record
- The right to a copy of the education record when failure to provide a copy of the record would effectively prevent the student form inspecting and reviewing the record. A copy may be refused, but if, in doing so, the institution does not limit the student's right to inspect and review that record.

The institution is not required to permit students to review and inspect the following:

- The information requested is financial information submitted by parents
- The Education Records contains information about more than one student; however, in such cases the College will permit the student access to that part of the record which pertains only to the inquiring student.

In addition, the College reserves the right to deny a student access to their Education Records in any of the following situations:

- The student has an unpaid financial obligation to the College.
- The student has an outstanding Library Obligation to the College.
- The College has an unresolved disciplinary action against the student.

I have read the above information detailing the educational rights afforded to me by the Family Educational Rights and Privacy Act and hereby *request to inspect and review my education records listed below:*

Student Signature

Date

Upon receipt of this request, an appointment will be scheduled with the Associate Vice President/Registrar to review the education records and receive an explanation and interpretation of the records requested.

Office use only: ____

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____ Date Received _____ Appt scheduled _____ Date Reviewed Records ____