

REQUEST TO INSPECT AND REVIEW  
STUDENT RECORD

Name \_\_\_\_\_  
Parent or Guardian

Address \_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_  
Student

School \_\_\_\_\_

( ) As the parent of the above named child, I am requesting access to review and inspect my child's school record. My child is under eighteen (18) years of age and presently enrolled in the above named school. \*

( ) As a student of majority age, I am requesting access to review and inspect my school record.

The specific records I wish to review are \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*Or, my child is eighteen (18) years of age or older but is considered a dependent under Section 152 of the Internal Revenue Code.

