

STUDENT PERSONNEL

Series 500

EXHIBIT REQUEST FOR HEARING ON CORRECTION OF EDUCATION RECORDS No. 506.1E3

To: _____ Address: _____
Board Secretary (Custodian)

I believe certain official education records of my child, _____,
(full legal name of student), _____ (school name),
are inaccurate, misleading or in violation of privacy rights of my child.

The official education records which I believe are inaccurate, misleading or in violation of the privacy
or other rights of my child are:

The reason I believe such records are inaccurate, misleading or in violation of the privacy or other rights
of my child is:

My relationship to the child is: _____

I understand that I will be notified in writing of the time and place of the hearing; that I will be notified
in writing of the decision; and I have the right to appeal the decision by so notifying the hearing officer
in writing within ten days after my receipt of the decision or a right to place a statement in my child's
record stating I disagree with the decision and why.

(Signature)

Date: _____

Address: _____

City: _____

State: _____ ZIP _____

Phone Number: _____

Date Approved: May 8, 2017
Date Revised: August 27, 2018