

The Family Education and Privacy Act of 1974, P.L. 93-380, Section 438 prohibits the release of information concerning students or former students from school records without the written consent of parents of minor students or students themselves (age 18 or over) with few exceptions. Please visit our website at http://detroitk12.org/admin/orea/ppm/student_records for more information regarding FERPA.

STUDENT RECORD INFORMATION

Last name: _____ First name: _____ M.I.: _____

Maiden/Former Name: _____ Birth Date: _____

Last school attended: _____ Year of Graduation: _____

I hereby request access to the above student's records.

Please complete and we will contact you with an appointment date, time and location:

Name of Requesting Person, Organization, Representative: _____

Parent Adult Student Legal Guardian Agency/Organization

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone Number: _____

Signature: _____ Date: _____
Parent, legal guardian, eligible student

¹ The above listed individual will be required to present valid photo identification upon accessing the record. Requesting person/organization, if not parent, legal guardian, eligible student must attach documentation evidencing representation of the DPS Special Education Student (i.e. signed release)

For Office Use Only: Served by: _____
Date Received: _____ Type of ID Provided: _____
Location/Date/Time _____