

Request to Inspect and Review Education Records

(pursuant to the Family Educational Rights and Privacy Act of 1974, as amended)

CC Student ID #	Student Name			
		/	/	/
Address		City	State	Zip Code
I,	Name (printed)	, have reviewed r	my education record	in the presence of:
Student	Name (printed)			
OFFICE OF THE REGISTF	RAR USE ONLY:			
Processed by: Reviewed Date:				
At my request, I was give	en a copy of the following i	nformation:		
Student Signature)ate	