

Jefferson-Lewis-Hamilton-Herkimer-Oneida BOCES
APPLICATION TO INSPECT STUDENT RECORDS

To: Records Management Officer
 Jefferson-Lewis BOCES
 20104 NYS Route 3
 Watertown, New York 13601

I hereby apply to inspect the following student's records: _____
 (Name of Student)

I hereby apply to inspect the following records: _____

I am the: ☐ Natural Parent
 ☐ Legal Guardian
 ☐ Individual acting as parent or guardian in the absence of student's parent or guardian
 ☐ Student over 18 years of age

 Signature

 Date

 Representing

 Address

FOR BOCES USE ONLY

Approved: _____

Denied: _____

- ☐ Requested record cannot be found
- ☐ Requested record has been destroyed
- ☐ Requested record not maintained by school

 Signature

 Title

 Date

NOTICE: You have a right to request correction of the content of the school records examined if you believe such records to be inaccurate, misleading or otherwise in violation of the privacy or other rights of the student by making a request on a prescribed form directed to the above referenced _____.

I hereby request a correction.

 Signature

 Date