

Request to Amend Education Record Information, Instructions and Forms

I. Information

- Under the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, if a student
 believes the education records relating to the student contain information that is inaccurate,
 misleading, or otherwise in violation of the student's privacy rights, he/ she may request to have
 his/her education record amended.
- If a decision is made not to amend the record as requested, the student will be informed of this decision and of the student's right to a hearing as required under FERPA. On request, the student will be given an opportunity for a hearing to challenge the content of his/her education records.
- If, as a result of the hearing, a decision is made that the information is inaccurate, misleading, or
 otherwise in violation of the privacy rights of the student, the record will be amended
 accordingly.
- If, as a result of the hearing, a decision is made that the information is not inaccurate, misleading, or otherwise in violation of the privacy rights of the student, the student will be permitted to place a statement in the record commenting on the contested information in the record or stating why he or she disagrees with the decision. Such statement will be maintained with the contested part of the record for as long as the record is maintained; and disclosed whenever the contested part is disclosed.

II. Instructions

- A student desiring to have his/her education record amended must complete and submit the attached to the Custodian of the record(s) that the student seeks to amend.
- The Custodian of such record will review the request and make a decision on the request, and provide written notice of the decision to the student.
- If a decision is made to not amend the record, the student may request a hearing to challenge the decision by completing and submitting a request to the College's Registrar within ten (10) business days from receipt of the decision.

Request to Amend Education Records

Name: Student ID:		dent ID:
Street Address:		
City:	State:	Zip code:
Telephone:	Location of Record (Office):
I have inspected my education records Office/Department at the College of th and Privacy Act (FERPA), I request that	e Siskiyous. Under the provision	ons of the Family Educational Rights
I request that the following document(s) be removed from my file:	
I believe it is in violation of my rights of	f privacy under FERPA as outlir	ned below:
I have read the information on the Prof for Requesting a Hearing if Request is o	-	endment of the Education Record and
Student Signature		

Custodian Reviewing Request to Amend Education Record		
Name:	Disposition of Request:	
Title:	Date:	
Reason for Approval/Disapproval (use next page if add	itional space is needed):	
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The Custodian must send a copy of this form to the student making the request and to the office of the record location