

## APPENDIX B

to

## Policy on Disclosure of Student Records

(This form is for use by non-students who seek access to education records.)

To obtain educational records from a FERPA Gatekeeper, fill out items 1-9 of this form and give to the appropriate gatekeeper listed on Appendix A. If your request is approved, you may then be asked for additional information.

Name of re	equestor:	
Departmer	nt:	
Contact Inf	formation (phone, email, campus +4):	
Records re	quested (describe):	
Purpose fo	r seeking records:	
Have you	considered seeking student consent? (explain)	
	Requestor's Signature:	
	Signature of Vice President or Dean:	(Date)
	r to whom request submitted:	(Date)
uest is:	□ Approved	
	□ Denied	
	□ Approved with modification	
	Department Contact Inf Records re Purpose for Have your	Department: