

Registrar's Office 2211 College View Drive Redding, CA 96003 Phone: (530) 226-4111 Fax: (530) 226-4870

## Office of the Registrar Request to Inspect and Review Education Records

STUDENT RECORDS: FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974 (FERPA) In accordance with federal law, students are hereby notified that they have the following rights with respect to their education records:

- 1. The right to inspect and review their own education records within 45 days of the date the university receives a request for access.
- 2. The right to request an amendment of the student's education records that the student believes are inaccurate or misleading.
- 3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.
- 4. The right to file a complaint with the United States Department of Education concerning alleged failures by the university to comply with the requirements of FERPA. Complaints should be directed to the Family Policy Compliance Office, U.S. Department of Education, 600 Independence Ave. SW, Washington, DC 20202-4605.

The university designates certain categories of student information as public or "directory information" which may be disclosed by the institution at its discretion, without prior written consent of the student. Such categories may include name, address, email address, telephone number, photograph, date and place of birth, major, class year, full-time/part-time status, participation in student activities, dates of attendance, degree and awards, most recent institution, intended career, height and weight of athletic team members. Currently enrolled students may withhold disclosure of the above directory information. To withhold disclosure, students must complete the Non-Disclosure Form in the Registrar's Office by 5 p.m. on Monday of the first class of the semester. Withholding of disclosure will remain in effect for the rest of that academic year. A new form for non-disclosure must be completed each academic year.

Student:		Record Custodian (person at front desk handling the request)
Last name	First name	nanumg the request)
Student ID		
I wish to inspect the fo	ollowing education record	l(s):
Student signature:		Record Custodian signature:
Date:		