



SEATTLE UNIVERSITY

COLLEGE OF EDUCATION
901 12th Avenue, P.O. Box 222000
Seattle, WA 98122-1090
(206) 296-5760
Email: coeinfo@seattleu.edu

INSPECT AND REVIEW EDUCATION RECORDS REQUEST

- Print in Ink -

Under the Family Educational Rights and Privacy Act (FERPA), the University has forty-five (45) days within which to make the requested records available for inspection. This office will, however, strive to have the records available within ten (10) business days of this request. Photo ID is required at the time of inspection.

Student ID Number: _____ Phone Number: (_____) _____
Area Code

Student Legal Name: _____ SU Email: _____@seattleu.edu
Last First Middle

Date of birth: ____/____/____ Former name (if applicable): _____
Month Day Year

Dates of attendance: _____ Date of graduation (if applicable): _____

TO: College of Education, Associate Dean for Academic and Student Services

I wish to inspect my education records that are housed in the College of Education.

► Student Signature: _____ Date: _____

To be completed after record(s) review:

I have inspected the contents of my education records.

I am satisfied with its accuracy and completeness.

I am not satisfied with its accuracy and completeness for the following reason(s):

Students who wish to have their education records amended must submit a letter specifying the requested change to the Associate Dean.

► Student Signature: _____ Date: _____