

PLYMOUTH COMMUNITY SCHOOL CORPORATION

REQUEST TO INSPECT AND REVIEW STUDENT RECORD

Name _____
Parent or Guardian

Address _____

Name _____ Grade _____ Age _____
Student

School _____

- As the parent of the above-named child, I am requesting access to review and inspect my child's school record. My child is under eighteen (18) years of age and presently enrolled in the above-named school.*
- As a student of majority age, I am requesting access to review and inspect my school record.

The specific records I wish to review are

Signature

Date

*Or, my child is eighteen (18) years of age or older but is considered a dependent under Section 152 of the Internal Revenue Code.