

PLYMOUTH COMMUNITY SCHOOL CORPORATION

PRIOR NOTICE OF INTENT TO DESTROY DATA USED FOR SPECIAL EDUCATION PROGRAMS AND SERVICES

Date _____

To _____

From _____, Records Officer

Student's Name _____ Date of Birth _____

This is to notify you that the information and/or data which has been used for the purpose of making educational decisions regarding the above-named student is no longer needed by this Corporation.

If you request, the information to be destroyed, we will keep a permanent record of the following: student's name, address, telephone number, grades, attendance record, classes attended, grade level, and year completed.

Please complete and return the bottom portion of this form by _____ if you are requesting that we retain these records.

If you have any questions, please contact my office at _____.

Student's Name _____ Date _____

Parent's Name _____

_____ I am requesting that all information and data no longer needed by the Corporation for the purpose of making educational decisions for _____ (Student's Name) be retained. I understand the information contained in the records may be needed in the future for Social Security benefits or other purposes.

Parent's Signature _____ Date _____