

FORM B: REQUEST TO INSPECT RECORDS

I, _____ (Name) _____, a student, 18 years of age or older
(date of birth _____ --', at _____
(Month) (Date) (Year) (School)
Gore Public Schools, request to inspect my records at the above school on _____ (Date) _____ (Time) _____
in the principal's office or such other reasonable time and place as the principal may indicate.

OR

If I no longer live in the school district, I request that the records be sent to me at the following address:

Name _____
Address _____
City, State, Zip _____

Enclosed is \$ _____ for reproduction and mailing.

Signature

The portion below this line may be completed but is not required by law.

INSPECTION REPORT

Date _____

The above student's education record was inspected on this date.

Remarks (if any): _____

Signature of Parent or Guardian

Signature of Principal