

Request to Inspect and Review Education Records

Return completed form to: OFFICE OF THE REGISTRAR Att: University Registrar Stony Brook Union, Suite 206 Stony Brook, NY 11794-3221

1. Enter your Stony Brook ID number and Information in the spaces provided below.

Student <u>Last</u> Name (Please Print)	Student <u>First</u> Name	stony Brook ID (if unknown, provide SS#)		
Home Phone number with area code	Daytime (work) phone with area code	Student Major (if applicable)	College (if applicable)	
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Home address including street n	umber, city, state and zip co	ode		
Email Address		Additional information:		
2. Read the following statements:				
Upon written request, the University shall provide a student with access to his or her educational records. The Office of the Registrar has been designated by the institution to coordinate the inspection and review procedures for student education records. Students wishing to review their educational records must make written requests to the Office of the Registrar listing the item(s) of interest. Educational records covered by FERPA will be made available within 45 days of the request.				
3. Complete the following information:				
I, hereby request to inspect and review my education records. The records that I request to review are as follows: (please be as specific as possible)				
When my records are ready for re Phone at Email at Mail sent to	view, I request to be notifie	ed by: (check one)		
Signature of Requestor		Date		
For Internal Use Only: Date request received by Universi Date Requestor notified that reco Date of review:				