

### Students

#### **Exhibit – Parent Request Form for Student Covered Information**

*To be used when a parent/guardian is requesting their child's covered information under the Student Online Personal Protection Act. A parent/guardian is limited to two requests per child per fiscal quarter. If the covered information requested includes data on more than one student, the parent/guardian may inspect and review only the covered information relevant to his/her child.*

Parent/Guardian Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Student Name: \_\_\_\_\_ School: \_\_\_\_\_

I request an (*choose one*):  **Electronic Copy**  **Paper Copy** of my child's covered information from the following operator(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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*Completed by the Records Custodian or Privacy Officer.*

Request received on: \_\_\_\_\_

Covered Information due to parent/guardian on: \_\_\_\_\_

Operator contacted on: \_\_\_\_\_

Covered information received from operator on: \_\_\_\_\_

Covered information provided to parent/guardian on: \_\_\_\_\_

\_\_\_\_\_  
Record Custodian or Privacy Officer Signature

\_\_\_\_\_  
Date

Added: 3/2023