



Office of the Registrar • Smyth 1
4245 East Ave • Rochester, NY 14618
Phone (585) 389-2800 • Fax (585) 389-2612
Email registrar@naz.edu

Request to Inspect and Review Educational Records
Return completed form to Registrar's Office

Last Name, First Name

Student ID#

Address

City/State/Zip

Email

Phone

Purpose of Review

I wish to inspect the following education record(s):

Office to which request was made:

I hereby agree to keep the information disclosed to me confidential
according to applicable legislation and regulations.

Student Signature

Date

Office use only

Disposition of request: Approved Not Approved

Specify materials reviewed (records, types of information)

Name of Official Supervising Review

Title

Signature of Official Approving Request

Date