Office of University Registrar
Fayetteville State University
300 Lilly Building
1200 Murchison Road
Fayetteville, North Carolina 28301
(910) 672-1185

## Request to Inspect and Review Education Records

Student	Record Custodian
LAST NAME FIRST NAME	LAST NAME FIRST NAME
STUDENT IDENTIFICATION NUMBER	LOCATION OF RECORD (OFFICE)
ADDRESS (LOCAL / ON-CAMPUS)	REQUEST RECEIVED (DATE)
CITY, STATE, ZIP	DATE AVAILABLE
TELEPHONE	CUSTODIAN SIGNATURE
I wish to inspect the following education record(s):	
DATE	STUDENT SIGNATURE
(COMPLETE SECTION BELOW AFTER RECORD(S) REVIEW)  I have inspected/been informed of the contents of the requested education record identified above and  I am satisfied with its accuracy and/or completeness.  I am <b>not</b> satisfied with its accuracy and completeness for the following reason(s):	
DATE	STUDENT SIGNATURE

Students wishing to have their education records amended must complete a "Request to Amend or Remove Education Records" form. This form is available at http://www.uncfsu.edu/documents/registrar/forms/request-record-ammend.pdf.

Return this completed form to: Office of the Registrar,  $3^{rd}$  Floor Lilly Building, Fayetteville State University, Fayetteville, NC 28301

(Observations of the record custodian of disposition of this request should be written on the back of this sheet.)