



## Request to Amend Student Education Record University of the Incarnate Word

**Student Name** \_\_\_\_\_  
**Email Address** \_\_\_\_\_

**Student ID** \_\_\_\_\_  
**Phone** \_\_\_\_\_

Requests to amend an Education Record will only be accepted after inspection and review of the Education Record is completed by the student. Upon receipt of this Request to Amend Student Education Record form, the University will decide within a reasonable time, but no later than within thirty (30) days, whether to amend the Education Record as requested. The student will be notified in writing (including email) whether the Education Record will be amended as requested. The written notice will state the reason(s) for the decision and notify the student of their right to request a hearing if the Education Record will not be amended as requested.

For additional information regarding FERPA, please visit <https://my.uiw.edu/registrar/ferpa.html>

**Which part of your Education Record do you seek to amend? (check all that apply):**

### Academic Information

- ☐ Class Schedule
- ☐ Registration Forms
- ☐ Substitution Forms
- ☐ Graduation Application
- ☐ Transcript
- ☐ Other (please specify)

### Accounts Receivable

- ☐ Billing/Payment History
- ☐ Balances
- ☐ Other (please specify)

### Admissions

- ☐ Application(s)
- ☐ High School Transcript(s)
- ☐ College Transcript(s)
- ☐ Essays/Personal Statement
- ☐ Test Scores
- ☐ Resume/CV
- ☐ Other (please specify)

### Advising

- ☐ Curricula Changes
- ☐ EAB Navigate Notes
- ☐ Other (please specify)

### Disciplinary Information

- ☐ Disciplinary sanctions
- ☐ Student Code of Conduct
- ☐ Title IX proceedings
- ☐ Other (please specify)

### Financial Information

- ☐ Financial Aid Status
- ☐ Grants
- ☐ Loans
- ☐ Scholarships
- ☐ Other (please specify)

**I believe the Education Record listed below contain information that is:**

☐ Inaccurate                      ☐ Misleading                      ☐ In violation of my privacy rights

**List the Education Record containing the information that you believe should be amended:**

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**Describe the information in the Education Record to be amended:**

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## Request to Amend Student Education Record

### University of the Incarnate Word

**Provide the reasons why you believe the Education Record is/are inaccurate, misleading, or in violation of your privacy rights:**

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**The above identified Education Record should be amended to indicate the following:**

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*If there is insufficient space on this form, additional sheets may be added.*

*Please attach any documentation which supports your request and indicate which documents you submitted during this review, if any, should be returned to you.*

**By submitting this signed Request to Amend Student Education Record, I certify that I have read the form in its entirety and that the information provided is accurate. I request to amend my Education Record as explained above.**

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Student Name

Student Signature

Date

For Registrar Office Use Only:

**Date Received:** \_\_\_\_\_

**Received By:** \_\_\_\_\_

**Decision:** \_\_\_\_\_ Amendment Approved

\_\_\_\_\_ Amendment Not Approved

**Decision Sent:** \_\_\_\_\_

**Registrar Signature:** \_\_\_\_\_

\* Pursuant to 34 CFR Sect. 99.20 and 99.21, if the University's decision is to not approve the requested amendment, student has the right to request a hearing to amend the student's education record on the grounds that the information contained in the education record is inaccurate, misleading, or in violation of the privacy rights of the student.

\*To request a hearing, please complete the **Request for Hearing to Amend Student Education Record** form and submit to the Office of the Registrar.