

FORM-9040-05: Request to Amend or Remove Ed. Rec. Form

Origination:9-22-2020

Approved: 9-22-2020;06-13-2024 Effective:9-22-2020;06-13-2024

Reviewed: 05-07-2024;06-13-2024

Last Updated:05-07-2024

Request to Amend or Remove Education Records Student: Please complete the top section and email this form to registrar@rrcnpa.org.

Name:		Student ID Number:
Address:		Email Address:
Regional College. The records I k privacy rights under NPRC Policy following way(s) are:	pelieve to be inaccurate,	Office of the Registrar at Northern Pennsylvania , misleading, or otherwise in violation of my nal Rights and I request be amended in the
Record Requested Amendme		nt and Reason for Request to Amend
I request that the following docu	ument(s) be removed fro	om my file:
Record Reason for Request to		-
	<u> </u>	
Signature:		Date:
Office of the Registrar		
Name:		Title:
Type of Request:		Date:
Reason for Approval/Disapprova	ıl:	
Signature:		Date:

Appeals of the Office of the Registrar's decision may be made by completing Form-9040-06: Student Request for Formal Hearing. This form is available through the College's website or the Office of the Registrar.

The Office of the Registrar must process the request within 20 working days of receipt of request and send a copy of this completed form to the student making the request and to the appropriate Academic Director.