

## **New York City Department of Education Student Records Request Form**

(Updated November 2014)

Please use blue or black ink only. Valid proof of identification is required. A family member of a student under the age of 18, and who is not the parent or guardian of the student, must provide both proof of identification and written consent signed by the parent or guardian, authorizing release to him/her. If the student is over the age of 18, the consent form must be signed by the current or former student. Please allow up to ten (10) business days for processing. Proof of familial relationship may also be necessary, if information confirming the relationship is not present in the student's records.

Section 1: Biographical Information					
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First Name	Middle Name		Last Name		
Date of Birth	NYCDOE Student ID (9-digit				
Mailing Address (House Numb	per Street Apartment Number)				
Maining / taarees (riease rianis	or, or oor, rearmone rearmony				
City	State			Zip Code	
Tolophono Number		Email Address			
Telephone Number					
Section 2: High School					
Name of Last NYC High Scho	ol Attended				
School Address					
District Number	Borough School Number			Is this school still of	anan? (airala
District Number	Borougn	School Number		one)	open? (circle
				one) YES	NO
Years of Attendance	Type of Records Requested (circle all that apply)		Did you graduate f	from this NYC	
				high school? (circle one)	
	TD ANCODIDE	REGISTRATION		VEC	NO
	TRANSCRIPT	REGISTRATIO	JN	YES	NO
Section 3: Signature					
	an individual age 18 or older. If s	student is under 18 yea	ars of age,	the form must be	e signed
by the student's parent of	or legal guardian.				
Signature			Date		
Oignature					

<sup>&</sup>lt;sup>1</sup> The consent form can be found in the Chancellor's Regulation A − 820.