

New York City Department of Education Student Records Request Form (Updated March 2024)

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 consent¹ 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					
First Name	·	Middle Name		Last Nam	e
Date of Birth		NYCDOE Student ID (9-digit		(9-digit)	
Mailing Address (I	House Number, Street, Apa	rtment Number)			
,		,			
City		State		Zip Code	
Telephone Number			Email Address	I	
Section 2: High School Information					
Name of Last NYC High School Attended					
School Address					
Concorr (adress					
District Number	Borough		School Number		Is this school still open? (select one) YES NO
Years of	Type of Records Request	ed (check all that apply)			Did you graduate from this NYC high
Attendance	TRANSCR		TRATION IEF	•	school? (select one) YES NO
	OTHER _				
Section 3: S	ignature				
Form must be s	igned by an individual	age 18 or older. If s	tudent is under 18 y	ears of a	ge, the form must be signed
by the student's	parent or legal guard	ian.			
Signature			Date		

¹ The consent form can be found in the <u>Chancellor's Regulation A – 820</u>.