



WILMINGTON UNIVERSITY

Office of the Registrar
320 DuPont Highway
New Castle DE 19720
(302) 356-6930/Fax (302) 328-8907
registrar@wilmu.edu - www.wilmu.edu

Request to Review Education Records (from a third party)

When a request for student record information is received, this form must be completed and filed in the student's file.

This form should not be completed when the request is:

- From the student:
- Accompanied by written consent from the student:
- For directory information:
- From a school official and a legitimate educational interest has been demonstrated or
- A subpoena that by its terms requires non-disclosure to the student.

Student Name _____

Student ID _____

Purpose of Review _____

Item(s) of Education Records Requested _____

Name of Requester _____

Requester Affiliation _____

Office to Which Request Was Made _____

Names and Legitimate Interest of Any Additional Parties to Whom Records May Be Disclosed _____

Disposition of Request: Approved Disapproved

Form Updated 9/18/2007