

Request for Release of SRJC / Disability Resources Records

Student's Last Name	First Name	SRJC Student ID #
<p>I am requesting the following records (check all that apply):</p> <p><input type="checkbox"/> Academic Accommodation Plan including list of accommodations and services</p> <p><input type="checkbox"/> Verification of Disability</p> <p><input type="checkbox"/> Other _____</p>	<p style="text-align: center;">For Office Use Only</p> <p><input type="checkbox"/> Document released</p> <p><input type="checkbox"/> Document does not exist</p> <p><input type="checkbox"/> Document released</p> <p><input type="checkbox"/> Document does not exist</p> <p><input type="checkbox"/> DRD is unable to release third-party documents. Please contact them directly for copies.</p> <p style="text-align: center;">_____</p> <p>DSPS Coordinator: _____ Initials/Date</p>	

Check and fill-in all that apply:

- Email my records as PDF to: _____
Email Address
- Mail my records to: _____
Name/Agency

Street Address

City/State/Zip
- I will pick up the records, please contact me at: _____
Telephone No. (including area code)

I understand that only SRJC documents can be released. High school IEP's or diagnostic reports done by other professionals cannot be released. I need to request those documents from the person or organization that originally created them.

Student's Signature	Date
Signature of Parent/Guardian if student is under 18	Date