

REQUEST FOR A STUDENT'S LIBRARY RECORDS

NAME OF STUDENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

GRADE/SCHOOL YEAR \_\_\_\_\_

BIRTHDATE OF STUDENT \_\_\_\_\_ AGE \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_

PARENT/GUARDIAN ADDRESS \_\_\_\_\_

Please provide library records relating to our child's use of the following library documents or other materials, resources or services from \_\_\_\_\_ through \_\_\_\_\_ as designated below.

Policy 2522 Library Media Centers makes available to parents, upon request, the library records of their student if the student is under the age of eighteen (18).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date