

APPENDIX F

(Please type or print clearly)

UNIVERSITY OF HAWAI'I
REQUEST TO AMEND EDUCATION RECORDS

I, _____, upon viewing the following document(s) _____,
(full name) (type or title)
created or authorized by _____, dated _____, and contained in my educa
(name, if known)
tion records, hereby question the

content accuracy

of the document(s). (specific content questioned) _____

I am therefore requesting that the following action be taken:

- That the entire document be destroyed.
- That the document be returned to the originator.
- That the specific portion in question be removed from my folder.
- That this request be permanently affixed to the document.
- That the following be substituted for the questioned portion:

The reason for my request is _____

(Use back if additional space is necessary)

I understand that the author of the document described above will be provided an opportunity to review the document and indicate his position relative to my request. Should the author choose to respond, I understand I will be provided access to his reply.

Signature of Student _____ / _____
(date)