

Woodridge Local School District

(Copy to be placed in Student's File.)

RECORD OF PERSONS OBTAINING ACCESS TO CONFIDENTIAL EDUCATION RECORDS

Student _____ Date of Birth _____

District _____ Building _____

Custodian of Records _____

<u>Name of Requesting Party/Party to Whom Records Disclosed*</u>	<u>Reason for Request/Disclosure**</u>	<u>Date Access Given</u>	<u>If Prior Parental Consent Required, Date Received</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- * Include in this column the names of State and local educational authorities and Federal officials and agencies that are permitted to make further disclosures of personally identifiable information from the student's education records without prior written consent of the student's parent or eligible student. The State or local educational authority or Federal official or agency that makes further disclosures of information from education records must maintain a record of the names of the additional parties to which it discloses information and their legitimate interests in the information. Upon request from the District, the State or local educational authority or Federal official or agency must provide a copy of the record of further disclosures to the District.
- ** If an education record is disclosed pursuant to the health or safety emergency exception, the disclosing school official must record the articulable and significant threat to the health or safety of a student or other individuals that formed the basis for the disclosure.

9/15/09