Student Request to Inspect and Review Education Records



Please see separate instructions f

Student Name:	
DU ID Number:	Social Security Number (if no DU ID number):
Mailing Address:	
City, State, Zip Code:	
Student Signature:	Date:
For the academic year 2020-21, the Office m ï from your University (du.edu) email address. Your	
typed name will constitute a signature for emailed forms. Questions about this policy and procedure may be directed to the Office of the Registrar at 303.871.3897. Students wishing to have their education records amended must submit a letter to the Office of the Registrar, University of Denver, 2197 S. University Blvd, University Hall G033, Denver, CO 80208.	
Date:	Record Custodian's Signature:

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