



TYLER INDEPENDENT SCHOOL DISTRICT

NOTIFICATION OF APPROVAL/DENIAL OF REQUEST TO INSPECT EDUCATION RECORDS

FROM: _____

Records Custodian

School

Tyler, Texas 757

For Office Use Only	
Date notification sent:	
Completed by:	

TO: _____

Name of Person who made the request

Date: _____

Address of Person who made request

Your request for an amendment of the education records of _____
was carefully considered.

Your request is:

- approved and the record will be amended as you requested.
- approved in part and denied in part for the following reasons:

- denied for the following reasons:

If your request for an amendment has been denied, in whole or in part, you have the right to a hearing on this issue. If you wish to request a hearing, please contact me by writing to the above address or by call (903) 262- _____ for more information.

Sincerely,

Name
Title