



Monroe 2-Orleans BOCES
PARENT/LEGAL GUARDIAN/ELIGIBLE STUDENT
REQUEST TO CONTEST RECORDS

I _____ hereby request a hearing to challenge
the contents of the school record(s) of _____.

My reason for requesting a hearing to challenge the content of these school record(s) is as follows (check
as many as apply):



The record(s) contain information that is inaccurate. Explain (be as specific as possible).



The record(s) contain information that is misleading. Explain (be as specific as possible).



The record(s) contain information that is in violation of the privacy or other rights of the student.
Explain (be as specific as possible).

It is my understanding that I will be notified within a reasonable time of my request as to the date, time,
and place of the hearing.

I also understand that I shall receive a written response by the hearing officer as to the disposition of the
hearing within a reasonable time of the hearing.

Print Name _____
(Parent/Legal Guardian/Eligible Student)

Signed _____

Date _____

Adopted: 3/18/2016
Reviewed: 9/19/2018
Reviewed: 8/18/2021
Reviewed: 8/21/2024