

Staff Only  
Date Received: \_\_\_\_\_  
Date Processed : \_\_\_\_\_  
Processed by: \_\_\_\_\_



OFFICE OF THE REGISTRAR  
*FERPA Student Request for Formal Hearing*

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Name: \_\_\_\_\_ Student Number: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
City: \_\_\_\_\_ Email Address: \_\_\_\_\_  
State and Zip Code: \_\_\_\_\_

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To: HBU Registrar Date: \_\_\_\_\_

I request a formal hearing concerning correction of what I believe to be inaccurate or misleading information contained in my education records.

The following education record(s) is/are being contested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am contesting the information because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please notify me of the date, time, and place of the hearing.

Student's signature \_\_\_\_\_