



Student Request to Inspect & Review Education Records

To Office of the Registrar:

Student Name: \_\_\_\_\_ Rebel ID #: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

I wish to inspect the following item(s) from my education record:

\_\_\_\_\_

I wish to see my education record for the following date range:

From \_\_\_\_\_ to \_\_\_\_\_

Purpose of Review: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To Student:

The Registrar's office will contact you within 45 days or, a reasonable timeframe for which to gather the records depending on the scope and scale of the request, using the email address listed above, to schedule a date, time, and location for you to review your record.

*You have the right to request amendment to your education records if, after review, you believe any of them to be inaccurate.*

Contact:

Office of the Registrar

University of Nevada Las Vegas

4505 Maryland Pkwy. Box 1029

Las Vegas, Nevada 89154

Ph (702) 895-3443

Email: registrar@unlv.edu