

## ACCREDITATION AUDIT RECORDS REQUEST

This form is to be used for requesting access to student records for accreditation audit purposes. Once completed, return the form to <a href="mailto:records@ou.edu">records@ou.edu</a>. The Certification and Compliance Specialist in the Office of the Registrar will contact you to arrange access to the requested records.

GENERAL INFORMATION		
Accrediting Entity:		
College/Department:		
Requestor (Person Responsibl	e for Records):	
Name:		
Title:		
Email:		
Plan for Maintaining and Dispo	osing of the Records in Compliance with OU	FERPA Policies:
List of Names and Titles of Per	rsons Who Will Have Access to the Records:	
RECORDS		
Type of Records Requested: Official Transcripts		
Unofficial Transcripts		
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Attach the list of students wh accreditation/audit records re	ose information you require and any other eview.	information provided for this
REQUESTOR CERTIFICATION		
I certify that I have tak	ken FERPA training prior to submitting this re	equest.
	use or disclose FERPA-protected information s, I will be subject to sanctions, which may in	in violation of the University's FERPA policies clude, but are not limited to, termination.
Printed Name	 	 Date