

San Diego Unified School District
Student Records Department
6735 Gifford Way, Room 13, San Diego, CA 92111
(858) 496-8201

The following information is required and mandatory for the release of inactive student records and/or information by the Student Records Department. We do not have in retention non-SDUSD Schools' inactive student records.

- **Please do not use this form if you are obtaining a Transcript, Proof of Graduation, Education Verifications, IEPs, etc.** The SDUSD School Site Registrars are responsible for processing such request. Always contact the school registrar at the last school you attended or graduated from. For contact information and the names of schools within the San Diego Unified School District, go to the SDUSD website at www.sandi.net and click on "Schools."
- **Fill out this form only if you are a SDUSD inactive student with a birth year of birth 1967 and under,** or if the last SDUSD School you attended is now closed (refer to form below). Please include a **clear** copy of official photo identification (State ID/Driver's License/Passport). Include a \$3.00 check/money order per request (**no cash**), made payable to *San Diego Unified School District or SDUSD*. Send to the Student Records Department by U.S. Mail to the address indicated above. The Student Records Department will contact you if additional information is needed (**NO WALK-INS**). The Student Records Department may not have in retention the entire SDUSD's inactive student records for the birth years of 1967 and under.

Inactive Student Records Release of Information Form

(Use this form only if your year of birth is 1967 and under,
or the last **SDUSD** School you attended was permanently closed.)

CURRENT NAME (Print) _____
NAME KNOWN AS IN SCHOOL/or same (Print) _____
DATE OF BIRTH _____ **PLACE OF BIRTH** _____
HOME ADDRESS _____
CITY _____ **STATE** _____ **ZIP CODE** _____

HOME PHONE _____ **CELL PHONE** _____
DRIVER'S LIC. /STATE ID/PASSPORT# _____ **EXPIRATION DATE** _____
DID YOU GRADUATE? (Yes/No) ____ **SCHOOL** _____ **GRADE** ____ **YEAR** ____
LIST ANY OTHER SAN DIEGO UNIFIED SCHOOLS YOU ATTENDED **GRADE** **YEAR**

1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

TO BETTER ASSIST YOU, WRITE A BRIEF STATEMENT OF WHAT YOU ARE REQUESTING (Education verification, transcripts, enrollment dates, etc.; and for what purpose?):

Your Signature _____ **Date** _____

This form will be filed with the SDUSD Student Records Department to show you have requested this information. The school does not release information concerning you to any non-educational organization, agency, or individual without your consent.

OFFICE USE ONLY

RECORDS ISSUED BY (initials) _____ Records found by: Microfilm, Cum, Printout Book, Census Card, other _____