



# La Joya ISD

## Request to Amend Student Record Form

Student Name: \_\_\_\_\_

ID#: \_\_\_\_\_

DOB: \_\_\_\_\_

Grade Level: \_\_\_\_\_

I, \_\_\_\_\_ (name) am requesting that  
\_\_\_\_\_ (campus) amend my own or my child's  
school record for the following reason(s):

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Parent/Guardian/Eligible Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### Office Use Only

What proof was provided? \_\_\_\_\_

Name of staff person making change: \_\_\_\_\_

Staff signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's signature: \_\_\_\_\_ Date: \_\_\_\_\_