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Office of Financial Aid
& Veterans Affairs

629 Industrial Park Avenue • Asheboro, NC 27205
336-633-0200 • www.randolph.edu

2021-2022 Student Request to Review Education Records

Name: Last First Middle Maiden

Current Mailing Address: City State Zip

RCC Student ID or SSN: Date of Birth:

Home Phone: ( ) Work Phone: ( ) Cell: ( )

Please be aware that RCC is prohibited from disclosing parental information to a student unless specifically authorized in advance to do so by the parent(s). Parents must submit a notarized statement specifying what they authorize to be released and to whom before records will be released to any third party.

Section One: As a current/former RCC student, I wish to:

- Make an appointment to review the following financial aid records, and/or
Receive a copy of the following financial aid records:

Year(s) of records: 2018-2019 2019-2020 2020-2021 2021-2022 Other

I am seeking the following information and/or documents (please be as specific as possible):

Parent information will be omitted from the information provided.

The RCC Office of Financial Aid and Veterans Affairs will provide a response to your request to review your financial aid records within 10 working days of receipt of this form. If you do not receive a response to your request within 15 days of the signature date below, please contact the RCC Office of Financial Aid and Veterans Affairs.

Section Two: Signature Authorization

Under penalty of perjury my signature below affirms that the information provided above is true and accurate to the best of my knowledge.

Signature Date

If not completed in the presence of a Office of Financial Aid and Veterans Affairs representative, then notarization is required:

On this day of, personally appeared before me, the said named known to me to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same and being duly sworn by me, made oath that the statements in the foregoing instrument are true.

Commission expires:
Signature of Notary Public

For Office Use Only

Complete below if the student signed this form and provided valid picture identification to a FAO representative.
FAO Representative Initials Date