PPS-7 Rev. 86

Student ID Number

School | School System | Date

NAME _____ **BIRTHDATE** _____

(Last) (First) (Middle) (Nickname) Mo Day Year

SEX: (M or F) RACE: American Indian ☐ Asian ☐ Black ☐ Hispanic ☐ White ☐ Other _____

CUMULATIVE RECORD INSPECTION LOG

(TO BE COMPLETED BY ALL NON-SCHOOL PERSONNEL, PARENTS AND STUDENTS, EACH TIME A REQUEST IS MADE TO REVIEW CUMULATIVE RECORD FOLDER)

DATE	NAME AND TITLE OF REQUESTOR	PURPOSE	WAS RECORD REVIEWED?