

Covered Information Request Form

“Covered Information” is personally identifiable information (PII) or information linked to PII in any media or format that is not publicly available and is (1) created by or provided to an online operator by the student or the student’s parent/guardian in the course of using the operator’s site, service or application; (2) created by or provided to the online operator by the District; or (3) gathered by an online operator through the operation of its site, service or application.

In accordance with any applicable federal regulations, a school must provide a student’s parent/guardian a paper or electronic copy of the student’s covered information, including any covered information maintained by an operator or the State Board, within 45 days of receiving a request for such information.

If a parent requests an electronic copy of the student’s covered information, the school must provide an electronic copy of that information, unless the school does not maintain the information in an electronic format and reproducing the information in an electronic format would be unduly burdensome to the school. There is no charge for an electronic copy of your student’s covered information. If you request a paper copy, there is no charge for the first 50 pages. Additional pages are provided at a charge of \$0.15 per page unless you are unable to bear the cost.

Each request for a copy of covered information must be submitted by a parent/guardian on a signed and dated request form that includes the parent/guardian’s name, address, phone number, student’s name, and the name of the school from which the request is being made. A school that receives a request must require a parent to provide proof of identity and relationship to the student before access to the covered information is granted.

If covered information requested by a parent/guardian includes data on more than one student, the parent may inspect and review only the covered information relevant to the parent’s student.

A parent/guardian may make no more than one request under this Section per State fiscal quarter (Quarter 1 is July, August, and September; Quarter 2 is October, November, and December; Quarter 3 is January, February, and March and Quarter 4 is April, May, and June.)

Parent/Guardian Request for a Copy of Student Covered Information

Please fill out all applicable areas to request a copy of your child’s Covered Information.

Parents First Name: _____

Permanent Address: _____

Phone Number: _____

Email Address: _____

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EAST AURORA
SCHOOL DISTRICT 131

Students Name: _____

Students District ID Number: _____

Home School: _____

_____ Electronic copy or _____ paper copy

Signature: _____ Date: _____

OFFICE VERIFICATION

Approved by District SOPPA Representative

_____ Date: _____