

Ph: 604-903-3444

Fax: 604-903-3445

## **Request for Student/School Information Letter**

## Personal Information and Proof of Identity:

If you are requesting your own records or records of a school-aged child for whom you have the legal right to make such a request, please complete this document and return it to the Office of the School where the request is being made. If the school is not in session, please return the completed form with accompanying picture ID to Records Management, 2121 Lonsdale Ave., North Vancouver, BC V7M

To ensure the privacy and security of student record information, this request must be accompanied by a copy of the Passport, Driver's License or other picture ID containing the student's legal name, date of birth, and photograph for students over the age of 18 or the parent/ legal guardian's name, photograph and signature for students under the age of 19. Once the ID is verified, the copy of the ID will be destroyed. The proof of identity must be of the person requesting the record. In addition, if a third party is designated to pick up the record(s) on behalf of the requestor, they must also present their ID when they come to collect the record(s).

NVSD44 collects and protects personal information under the authority of the Freedom of Information and Protection of Privacy Act for the purposes of operating the programs and services of the School District. Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used only for the purposes of responding to your request. If you have any questions about the collection, use or disclosure of this information, please call the Office of the Secretary-Treasurer at 604 903 3452.

## **Emailing records:**

If you choose to return the completed form and credit card authorization via email, you are assuming all risk associated with the electronic transfer of your personal information, which may include the transmission of this information outside Canada to servers in other jurisdictions subject to foreign laws and privacy rights. Our email address is records@sd44.ca.

If you opt to have your records sent to you via email, please note that you are assuming all risk associated with the electronic transfer of your personal information, which may include the transmission of this information outside Canada to servers in other jurisdictions subject to foreign laws and privacy rights. Please note emails sent from sd44 email addresses are not encrypted.

Legal Last Name of Student(s	)·		
First Name(s): Child 1:	Child 2:	Child 3:	Child 4:
DOB(s) (dd-MMM-yyyy)			
Last School Attended in North	Vancouver School District:		
or guardian name on Cost of the letter and Payment in cash only	record (at the time of the request documents is \$30.00 for each stu	) document and certified copy of Paudent.	e letter, document with address and/ SR card; de. Payments made in-person at the
Confirmation of home add	ress & guardianship Perce	entage of education in English	Number of Copies required:
Cortified Con	y Non-Certified Copy		
Request: Certified Copy			
	Collected in Person Collec	cted by:	
Indicate if records are to be:		cted by:rmation on this form is true and cor	rect.
Indicate if records are to be:		rmation on this form is true and cor Contact Phon	

6400-99-02 Page of 04-Apr-2024