



**STUDENT REQUEST TO SEE
PMM FILE CONTENTS**

Instructions:

1. In keeping with the Family Education Rights and Privacy Act of 1974, student record information is issued upon written request or authorization of the student.
2. Complete one form per request to view records.
3. **Return completed form to Practice in Ministry and Missions Office.**

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Last Name **First Name** **Middle Initial**

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Email Address **Phone Number**

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Wesley ID **Degree Program** **Year of entry into Practice of Ministry and Mission Program**

I am requesting to view materials in my PMM file:

Form of ID: _____

Student Signature

Date

FOR OFFICE USE ONLY:

Request completed by

Date

Materials Copied: