TITLE: Procedures for Requests for Educationally Related Records of Students with or Suspected of Having Disabilities  

ROUTING  
All District and Charter Operated Schools  
Instructional Superintendents  
Instructional Directors  
Special Education Service Center Administrators  
Psychological Service Coordinators  
School Site Administrators  
Charter School Administrators  
MCD Clerks  
Records Clerks  

NUMBER: BUL-5526.6  

ISSUER: Beth Kauffman, Associate Superintendent  
Division of Special Education  

DATE: November 14, 2016  

PURPOSE: The purpose of this Bulletin is: (1) to outline the District’s policy for responding to requests for educationally related records for students with or suspected of having disabilities; and (2) to provide staff at both District and Charter-operated schools and offices with information and procedures for responding to requests for educationally related pupil records for students with or suspected of having disabilities.  

MAJOR CHANGES:  
• This Bulletin replaces BUL 5526.5 of the same title issued on February 9, 2015.  
• New FAX number (213) 241-2417  
• Updates to School Site Verification of Records Form (Attachment B)  
• Local District summer breaks and school vacation response notification letter has been added (Attachment C)  

BACKGROUND: California Education Code § 56504 states, “The parent shall have the right and opportunity to examine all school records of his or her child and to receive copies pursuant to this section and to Section 49065 within five business days* after the request is made by the parent, either orally or in writing.”  
*Saturdays, Sundays, and state and federal holidays do not count as business days for this purpose. Summer breaks and school vacations count as business days for this purpose.  

PROCEDURES: The following policies and procedures apply:  

All requests for educationally related records for students with or suspected of having disabilities attending District or Charter-operated schools will be responded to by the appropriate Custodian of Records either at the school site of attendance and/or Special Education Service Center Operations.
PROCEDURES (Continued):

All educationally related records requests for students with or suspected of having disabilities at District-operated schools and at Charter-operated schools are to be mailed, emailed, or faxed to:

Custodian of Records
Los Angeles Unified School District
Division of Special Education
Special Education Service Center, Operations
333 S. Beaudry Ave., 18th Floor
Los Angeles, CA 90017
(213) 241-2417 (fax)
sesc-operations@lausd.net (email)

School Site – Parent Request
I. Upon receipt of a request of records by parent of a student with or suspected of having a disability at a school site, school will process and route request as follows:

1. Within one (1) business day, provide and assist parent with completion of “Request for Educationally Related Records” form (Attachment A1 - English or Attachment A2 - Spanish);
2. Forward the completed records request form via fax to Custodian of Records – Special Education Service Center Operations, at (213) 241-2417 or scan and e-mail to: sesc-operations@lausd.net Subject: Request for Records.

School Site – Agency and Law Firm Request
II. School site procedures related to a request for records from agencies and law firms:

1. Within one (1) business day, fax or e-mail to Custodian of Records request for records from an agency or law firm;
2. Request will be logged in as received by Custodian of Records;
3. Custodian of Records will begin to process request;
4. Custodian of Records will fax to the school site the Request For Records Maintained at The School Site and School Site Verification of Records (Attachment B);
5. School Site will log in the date the completed form was received;
6. School will begin the records request retrieval/search as identified (Attachment B);
7. School site is responsible for mailing all documents to identified individual(s) on Attachment B: Do Not send to Custodian of Records unless specified;
8. School site must confirm completion of request within the five (5) business days of receipt of school site request from Custodian of Records by forwarding the signed Verification of Records via fax or e-mail to Custodian of Records in order to archive request/response completion by school site (Attachment B);
PROCEDURES (Continued):

9. School site must maintain original copy of *Verification of Records* (Attachment B) and list of documents sent.

Custodian of Records – Direct Requests

III. Upon receipt of the request, the Custodian of Records will process and route request as follows:
   1. Log the date the request was received;
   2. Process records retrieval;
   3. Mail documents to identified individual;
   4. Route additional request for information forms to school site (if necessary),
      - *Request For Records Maintained at the School Site and School Site Verification of Records* (Attachment B).

Sending requests for records of students with or suspected of having disabilities to any location other than the one listed will delay the response to the requestor.

Custodian of Records – Summer Breaks and School Vacations

IV. Upon receipt of the request, the District Custodian of Records will process and route request as follows:
   1. Log the date the request was received;
   2. Retrieve and process “Central Records Maintained;”
   3. Send notification of request received to Local District Superintendent (Attachment C);
   4. Mail “Central Records” to requestor within five (5) business days.

Local District Response – Summer Breaks and School Vacations

V. Upon receipt of the letter from Custodian of Records (Attachment C), Local District Personnel will process and route request as follows:
   1. Local District Superintendent provides request to designee for processing “School Site Records Maintained;”
   2. Designee responds by retrieving copies of documents that are placed in the student’s cumulative folder (School Site Cumulative Folder);
   3. Local District is responsible for mailing “Records Maintained at the School Site” to identified individual within five (5) business days, **Do Not** send records to Custodian of Records unless specified;
   4. Local District designee must confirm completion of request within the five (5) business days of receipt from the Custodian of Records by forwarding the signed “Verification of Records Form” and a documented list of records sent via fax or e-mail to Custodian of Records in order to archive request completion by Local District (Attachment B);
   5. Local District must maintain original copy of “Verification of Records” (Attachment B) and list of documents sent;
   6. If Local District personnel or the school principal require assistance at the school in determining which records are requested, Division of Special Education and Custodian of Records can assist.
AUTHORITY: This is a policy of the Superintendent of Schools.

RELATED RESOURCES:
- California Education Code
- Special Education Policies and Procedures Manual
- Los Angeles Unified School District Parent/Student Handbook

ATTACHMENTS:
Attachment A1: Request for Educationally Related Records for Students With or Suspected of Having Disabilities Form (English)
Attachment A2: Request for Educationally Related Records for Students With or Suspected of Having Disabilities Form (Spanish)
Attachment B: Request for Records Maintained at the School Site and School Site Verification of Records Form
Attachment C: Summer Breaks and School Vacations Notice to Local District

ASSISTANCE: For assistance or further information, please contact the Custodian of Records, Elias Juarez, at (213) 241-6701 or via email at ejuare5@lausd.net.

The Los Angeles Unified School District Charter Operated Programs Director and the Special Education Service Center, Operations are co-located within the LAUSD SELPA and use the same contact number.
LOS ANGELES UNIFIED SCHOOL DISTRICT  
DIVISION OF SPECIAL EDUCATION

Custodian of Records  
District-Operated Schools and Charter Operated Schools  
Division of Special Education  
Special Education Services Center, Operations  
333 S. Beaudry Ave., 18th Floor  
(213) 241-2417(fax)

REQUEST FOR EDUCATIONALLY RELATED RECORDS FOR  
STUDENTS WITH OR SUSPECTED OF HAVING DISABILITIES

Dear Parent:

Please use this form to request educationally related records for your child who has a disability or is suspected of having a disability. Once it is completed and signed, please submit to the address or fax listed above.

In this box, please indicate the type of educationally related records you would like to have provided to you.

<table>
<thead>
<tr>
<th>Time Period Requested From:</th>
<th>Date</th>
<th>To:</th>
<th>Date</th>
</tr>
</thead>
</table>

- [] Individualized Education Plan (IEP)  
- [] Psychoeducational Evaluation  
- [] Cumulative Records  
- [] Other, Specify:

All Information should be clearly printed or typed. Thank you.

<table>
<thead>
<tr>
<th>Student Last Name</th>
<th>Student First Name</th>
<th>Middle Initial</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Does the student have a current IEP?</th>
<th>Yes</th>
<th>No</th>
<th>M</th>
<th>F</th>
<th>Date of Birth</th>
<th>Grade</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Student Current School of Attendance</th>
<th>City</th>
<th>Zip</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Is this a Charter School?</th>
<th>Yes</th>
<th>No</th>
<th>School Phone Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Parent (Print)</th>
<th>Signature of Parent</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Contact Phone</th>
<th>Contact Cell</th>
<th>Email</th>
</tr>
</thead>
</table>

Forward records to the attention of:

<table>
<thead>
<tr>
<th>Name of Person</th>
<th>Address</th>
<th>City</th>
<th>Zip</th>
</tr>
</thead>
</table>

For Office Use Only:

<table>
<thead>
<tr>
<th>Date Request Received</th>
<th>Name of Person Processing Records</th>
<th>Date Records Sent</th>
</tr>
</thead>
</table>

Ed Code 49065. - Any school district may make a reasonable charge in an amount not to exceed the actual cost of furnishing copies of any pupil record; provided, however, that no charge shall be made for furnishing (1) up to two transcripts of former pupils' records or (2) up to two verifications of various records of former pupils. No charge may be made to search for or to retrieve any pupil record.
SOLICITUD DE EXPEDIENTES RELACIONADOS CON LA EDUCACIÓN PARA ALUMNOS CON O QUE SE SOSPECHA QUE TIENEN DISCAPACIDADES

Estimado padre de familia:

Favor de utilizar este formulario para solicitar expedientes relacionados con la educación para su hijo(a) que tiene discapacidad o que se sospecha que tiene discapacidad. Una vez llenado y firmado, favor de enviarlo por correo o por fax al domicilio anteriormente mencionado o regrese a la escuela y ellos lo presentarán por usted.

En este cuadro, favor de indicar el tipo de expedientes relacionados con la educación que a usted le gustaría que se le proporcionen.

<table>
<thead>
<tr>
<th>Tipo de expediente</th>
<th>Fecha de nacimiento</th>
<th>Grado</th>
<th>Inicial del segundo nombre</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programa De Educación Individualizada (IEP)</td>
<td>Fecha</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evaluación de Psicología</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registros Acumulativos</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Otros Expedientes Especificar:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Toda la información debe ser escrita a máquina o en letra de imprenta.

<table>
<thead>
<tr>
<th>Apellido del alumno(a)</th>
<th>Nombre del alumno(a)</th>
<th>Inicial del segundo nombre</th>
</tr>
</thead>
<tbody>
<tr>
<td>¿Tiene el alumno(a) un IEP actual?</td>
<td>Sí, No, M, F</td>
<td>Fecha de nacimiento</td>
</tr>
<tr>
<td>Nombre de escuela del alumno(a)</td>
<td>Ciudad</td>
<td>Código Postal</td>
</tr>
<tr>
<td>¿Es esta una escuela autónoma?</td>
<td>Sí, No</td>
<td>Número de tel. de escuela</td>
</tr>
<tr>
<td>Nombre del padre</td>
<td>Firma del padre</td>
<td>Fecha</td>
</tr>
<tr>
<td>Número de tel. de contacto</td>
<td>Número de celular de contacto</td>
<td>Correo electrónico</td>
</tr>
</tbody>
</table>

Favor de enviar los expedientes a la atención de:

<table>
<thead>
<tr>
<th>Nombre de persona</th>
<th>Domicilio</th>
<th>Ciudad</th>
<th>Código postal</th>
</tr>
</thead>
</table>

Sólo para Uso Interno:

<table>
<thead>
<tr>
<th>Fecha de Solicitud recibida</th>
<th>Nombre del empleado encargado de procesar la solicitud</th>
<th>Fecha</th>
</tr>
</thead>
</table>

Ed Code 49065. - Any school district may make a reasonable charge in an amount not to exceed the actual cost of furnishing copies of any pupil record; provided, however, that no charge shall be made for furnishing (1) up to two transcripts of former pupils' records or (2) up to two verifications of various records of former pupils. No charge may be made to search for or to retrieve any pupil record.
REQUEST FOR RECORDS MAINTAINED AT THE SCHOOL SITE
AND
SCHOOL SITE VERIFICATION OF RECORDS

A request for student records has been submitted to the District on behalf of the student whose name appears below. This request has been logged into the District’s document management system. The records are to be provided immediately to the individual whose name and address appears at the bottom of this form.

DATE OF THIS NOTICE: ________________________ DATE REQUEST SENT TO SCHOOL: ________________________

STUDENT NAME: ___________________________ DATE OF BIRTH: ________________________

STUDENT IDENTIFICATION NUMBER: ___________________________

Directions:
1. The following records (copies) should be mailed directly to the individual identified below.
2. Complete request and forward ONLY signed verification to Custodian of Records.
3. THE CUSTODIAN OF RECORDS OFFICE – DIVISION OF SPECIAL EDUCATION PROVIDES HARD COPIES OF IEPs. THE SCHOOL SITE MUST PROVIDE ALL SIGNATURE PAGES AND ALL ADDITIONAL STUDENT RECORDS MAINTAINED AT SCHOOL SITE AS INDICATED BELOW:

<table>
<thead>
<tr>
<th>(Check the applicable box)</th>
<th>ALL</th>
<th>CURRENT</th>
<th>OTHER (See Below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cumulative File</td>
<td></td>
<td>Signed Assessments/Notifications</td>
<td>Adapted Physical Education</td>
</tr>
<tr>
<td>Academic Assessment</td>
<td>IEP Signature Pages</td>
<td></td>
<td>Visually Impaired</td>
</tr>
<tr>
<td>Discipline Records</td>
<td>Occupational Therapy</td>
<td></td>
<td>Deaf Hard of Hearing</td>
</tr>
<tr>
<td>Counseling</td>
<td>Assistive Technology</td>
<td></td>
<td>Health Records/Nurse Reports</td>
</tr>
<tr>
<td>Language and Speech</td>
<td>Behavior Assessments</td>
<td></td>
<td>Physical Therapy</td>
</tr>
<tr>
<td>Other, Specify:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mail documents directly to the address provided below:
Name: ___________________________ Contact: ________________________
Address: ___________________________ City/Zip Code: ________________________

VERIFICATION: COMPLETE REQUEST AND FAX THIS BACK TO CUSTODIAN OF RECORDS

Signed verification must be completed and faxed to Custodian of Records Technician in order to archive completion of request.

I confirm that each of the requested records maintained at the school site have been provided as requested:
Name of School: ___________________________ Date: ________________________
Administrator Signature: ___________________________ Title: ________________________
If Sent Via Certified Mail Write Article Number: # Date Sent: ________________________

☐ NO records available at this location. ☐ Records were sent to ___________________________ on ________________________
☐ School site certifies that no records are maintained/exist at this location and has notified requestor on ________________________
TO: Local District Superintendent of Schools/Summer Records Designee

FROM: Special Education Service Center, Operations-Custodian of Records

DATE: ______

RE: Summer Breaks/Vacation School-Site Request for Records

STUDENT ID#: ______

SCHOOL NAME: ______

The Custodian of Records Office - Division of Special Education has received a request for records for the above mentioned student. As a result, I am notifying you that California Department of Education Code §56504 states, “The parent shall have the right and opportunity to examine all school records of his or her child and to receive copies pursuant to this section and to Section 49065 within five business days after the request is made by the parent, either orally or in writing.” This means that even when school is not in session such as the summer break, the five (5) day timeline is in effect. Los Angeles Unified School District Policy Bulletin 5526.6 has information and procedures for responding to each request.

In order to avoid a violation of Education Code § 56504, we ask for your assistance in gathering all existing school site student records for the above-named student. Division of Special Education personnel provide all records that can be accessed electronically such as Individualized Education Programs, attendance, grades and other available information. However, many student records requests require copies of documents that are placed in the student’s cumulative folder. If Local District personnel/designee or the school principal requires assistance at the school in determining which records are requested, Division of Special Education personnel can assist. Thank you for your support in responding to this request for student records by providing the records requested directly to the listed requestor on the Request for Records Maintained at the School Site form. We look forward to working with you and supporting you by answering any questions you may have.

Sincerely,

Elias Juarez, Administrator
Custodian of Records
Division of Special Education

“The teachers, administrators, and staff of the Los Angeles Unified School District believe in the equal worth and dignity of all students and are committed to educate all students to their maximum potential.”

(Att. C: BUL-5526.6)