



## OFFICE OF RIGHTS, COMPLIANCE AND ACCOUNTABILITY

### Disciplinary Records Requests

The Office of Rights, Compliance and Accountability maintains a disciplinary record for every student found responsible for a violation of the University Student Code of Conduct. Student conduct records are held for seven years, some records may be held longer. Records of expulsions are maintained permanently.

Some employers graduate, and professional schools require that applicants authorize the release of their disciplinary records in order to be considered for employment or admissions. A Release Authorization Form is required to release a student's disciplinary file to a different school or agency. Once you send in the attached form or the Release Authorization Form, the Office of Rights, Compliance and Accountability will schedule an appointment for you to view your records in person. Please note pictures and recordings are not allowed to be taken and copies are not allowed to be removed from the office. The files maintained by the Office of Rights, Compliance and Accountability are separate from transcripts, which are maintained by the Registrar's Office.

#### Requesting Disciplinary Records

**Student:** To request to view a copy of your student conduct records, please fill out the attached form and email it to [uaf-orca@alaska.edu](mailto:uaf-orca@alaska.edu), fax to 907-474-5273, or mail to:

Office of Rights, Compliance and Accountability  
University of Alaska Fairbanks  
P.O. Box 756910  
Fairbanks, AK 99775

The records may include redactions to protect the confidential information of other students or affiliates who may have been involved in an incident or hearing process. Request for copies will be processed within 45 calendar days, requests are not immediately available because records may need to be redacted. Students will need to bring a government issued ID to the scheduled meeting.

Extenuating circumstances preventing the student from coming to campus must be communicated to the Office of Rights, Compliance and Accountability and we will determine how to distribute redacted information to satisfy the request. However, this does not include the distribution of photos or videos.



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## Authorization to Review Copies of Student Records

<b>Requested By (Student): (please print)</b>	<b>Release To (Recipient):</b>
_____ LAST NAME      FIRST NAME      MIDDLE	_____ LAST NAME      FIRST NAME      MIDDLE
_____ STUDENT ID NUMBER	_____ RELATIONSHIP
_____ DATE	

If you are requesting for another individual to review your records please include contact information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Student Conduct Records

*Note: Student conduct records will be made available in person within 45 calendar days of the request:*

I, \_\_\_\_\_, am requesting a copy of my student conduct record. My reason for requesting my record is:

\_\_\_\_\_  
\_\_\_\_\_

I hereby authorize the University of Alaska Fairbanks to release my student conduct records to the recipient named on this form.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

Please show your government ID. ID type: \_\_\_\_\_ Verified By: \_\_\_\_\_ Date: \_\_\_\_\_