



**LAHC**  
LOS ANGELES  
HARBOR COLLEGE

Los Angeles Harbor College  
1111 Figueroa Place  
Wilmington, CA 90744

## PROXY REQUEST FORM

### FOR ADMISSIONS & RECORDS OFFICE ONLY

Proxy form **must** be submitted by the student either in person or through their LACCD student email.

Name: _____	
Last	First
Date of Birth: _____	Student ID #: _____
E-Mail: _____	Contact Number: _____

I authorize permission for the proxy listed below to have access to the following of my educational records:

\_\_\_\_\_  
Proxy (First and Last Name as shown on ID)

**\*\*Proxy list in this section MUST bring valid government issued photo identification in order to access educational record\*\***

- Transcript Request/Pick Up
- Verification Request/Pick Up
- Submitting Enrollment Request Form
- Submitting K-12 form/ Homeschool Affidavit
- Student Record Information
- Other \_\_\_\_\_

I understand that under the Family Educational Rights and Privacy Act (FERPA) of 1974, verification may not be released without the written consent of the student. Verification will not be processed without student signature.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_