



LAHC
LOS ANGELES
HARBOR COLLEGE

Los Angeles Harbor College
1111 Figueroa Place
Wilmington, CA 90744

PROXY REQUEST FORM

FOR ADMISSIONS & RECORDS OFFICE ONLY

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: _____