ORANGE UNIFIED SCHOOL DISTRICT STUDENT AND COMMUNITY SERVICES

1401 North Handy - Orange, CA 92867 (714) 628-5424 Fax #: (714) 628-4061

REQUEST FOR MINOR'S RECORDS TO REFLECT OTHER THAN LEGAL NAME

	Minor's Legal Name-Recorded	I on Age Verification document	Date of Birth	
	Address	City	Zip Code	
() (Home Phone #) Work Phone #	Name of School	

I am a natural parent of the above mentioned minor student. My son/daughter is presently attending the Orange Unified School District and I hereby request that from this day forward all student records pertaining to the minor stated above be recorded reflecting a name other than the student's legal name. I understand that this form will remain in the cumulative folder throughout his/her educational career and that it includes his/her legal name.

The reason for this request is as follows:

- 1. I hereby state this request is not being made in an attempt to avoid contact from a natural parent, guardian, or any court appointed individual; nor is it an attempt to avoid contact from any law or governmental agency.
- 2. Should the other natural parent be alive and not residing with the above mentioned student: I hereby state that this request is not presently in dispute by the other natural parent, nor am I aware of any written or oral statements by the other natural parent which may indicate that this request may become an issue in a dispute. I further stipulate should such a dispute occur, that the Orange Unified School District will not be held financially liable for any cost incurred in the direct resolution of a dispute for the above mentioned minor.
- 3. Should the other natural parent be alive and not residing with the above mentioned student: I hereby state that I have contacted or attempted to contact the other natural parent stating the reason for this request. The results of the contact was, or the reason contact is not possible is as follows:

4. I hereby state that I will not hold the Orange Unified School District liable for any difficulties, which may occur in the processing of student records recognizing a name other than a legal name.

I hereby request that the school records hereby reflect the following name (please type or print):

PRESENT LEGAL NAME OF MINOR:						
DATE OF BIRTH:						
	FIRST NAME:					
Ν	MIDDLE NAME:					
			26) that the foregoing is tr			
correct. In addition, I hereby agree to immediately reimburse the Orange Unified school district for all costs incurred to false information that I have provided:						
Executed on thi	s day of	, 20 in	, California.			
Signature of Na	tural Parent:					
Name of Natura	Name of Natural Parent (please print):					
Address		City	State			
Zip Code	Phone Num	ıber				
Attach Docum	ent					
"CALIFORNIA	JURAT WITH AFFIA	ANT STATEMENT'	" GOVERNMENT CODE	§ 8202		
This section to be completed by the Orange Unified School District's Custodian of Records.						
This request is: Appro	ved Not	Approved	Date:			
Signature of OUSD Cu	stodian of Records:					
Approved forms are to be placed and are to remain in the "Student's Cumulative Folder".						