



**THE GEORGE
WASHINGTON
UNIVERSITY**

WASHINGTON, DC

<p>Responsible University Official: Associate Dean for Student Affairs Responsible Office: Office of Student Affairs Most Recent Revision: 11/17/2023</p>
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POLICY ON ACCESS TO STUDENT RECORDS

Policy Statement

Student academic records are confidential documents. This policy outlines those individuals who have a right to access student academic records and the procedures required to obtain access to said records as defined in the Definitions section of this policy.

The following individuals may have access to select student records at any time in the conduct of their administrative duties in the School of Medicine and Health Sciences (Level I access). Only those with Level II access can view the full academic record, including documents related to professionalism violations.

- Administrative staff of the Office of Student Affairs
- Administrative staff of the Office of Medical Education
- Assistant and Associate Deans for Student Affairs and Curriculum
- Associate Dean of Student Affairs (Level II access)
- Senior Associate Dean for M.D. Programs
- Dean, School of Medicine and Health Sciences

A student can access their grades and evaluation records online immediately after that record has been completed and posted by accessing secure password-protected online portals, such as Blackboard, Medhub, Registration (Regi) portal, Banner and the GW DOCS system. Grades are posted no later than 6 weeks after the course/clerkship has been completed. This includes access to final course/clerkship grades, grades for individual components of the final grade, clinical evaluations and the Medical Student Performance Evaluation (MSPE).

A student may request access to their full academic records at any time by completing the attached online request/consent form and submitting it to the registrar's office. The full academic record can be made available to the student in 14 business days from submission of the request form. The following individuals may access student records only with the written consent of the student as provided via the request/consent form. Only those

documents specifically indicated by the student will be released.

- Faculty and staff of the Medical School
- Members of the decanal staff other than those listed above
- Individuals external to the SMHS including, but not limited to, family, members of the public, scholarship organizations, employers, residency program staff and faculty, and licensing bodies.

Students who wish to contest the accuracy of any materials (e.g., letters, reports) may do so by submitting the attached form to the registrar's office and the Associate Dean for Student Affairs.

The Associate Dean for Student Affairs will review the student's request and may

- a) Approve the request without further review or
- b) Meet with the student to obtain additional information prior to making a final decision. If the student disagrees with the decision of the Associate Dean for Student Affairs, the student may appeal to the Senior Associate Dean for M.D. Programs in writing whose decision will be final.

N.B. This procedure is not to be used to challenge a course or clerkship grade; that policy/procedure is defined in the Regulations for M.D. Candidates.

Reason for Policy/Purpose

To comply with federal regulations regarding student privacy as outlined in the Family Educational Registrar and Privacy Act (FERPA).

Who Needs to Know This Policy

All students, residents, fellows, faculty, and staff of the School of Medicine and Health Sciences

Forms

See appendices for Request/Consent Form for student records. Students may access and submit this form directly through the MD Registrar webpage.
(<https://smhs.gwu.edu/academics/md-program/office-md-registrar>)

Contacts

Office of Student Affairs 202-994-2202

Definitions

1. **Student Educational Records:** Student educational records are defined as the content of the student's formal academic file including admissions information, official correspondence, consent forms, grades, evaluations, records of sanctions and proceedings related to Medical Student Evaluation Committee review of academic issues, residency match results, Medical Student Performance Evaluations, and any electronic files, databases, or applications containing these documents or information. Records related to honor code or professionalism violations are also part of the academic record and can be viewed by the student with written request or by select administrators with level II access.
2. **Immunization Records:** These records are not part of the student's academic record and are maintained in a secure, HIPAA-compliant database, Certiphi. These records can only be released with the written consent of the student. These are not available to the Deans, faculty, or staff of the SMHS.

Appendices

Example of Request/consent form for access to medical student records. Students may access and submit this form directly through the MD Registrar webpage. (<https://smhs.gwu.edu/academics/md-program/office-md-registrar>)

Who Approved This Policy

Office of Student Affairs, MD Program, School of Medicine and Health Sciences
Executive Committee of the SMHS Faculty Assembly, 11/17/2015

**Request/Consent to Review Medical Student Academic
Records
MD Program, The School of Medicine and Health Sciences
The George Washington University**

Students have the right to inspect and review their education records within 45 days of the date GWU receives an access request. Students should submit a written request to a GWU official that maintains the record that identifies the record they wish to inspect. *Submission of this form acts as the written request.*

Note: Students have 24/7 access to their grades, evaluations and academic schedule through the student portal (REGI), Banner and Medhub.

Students have the right to provide written consent before GWU discloses personally identifiable information from the student's education records, except to the extent FERPA authorizes disclosure without consent. A [Disclosure of Student Information Form](#) must be submitted to the Office of the MD Registrar (registrarmd@gwu.edu) in order to instruct the SMHS to withhold "directory information."

Date of Request: _____

Student Name: _____

GW ID Number: _____

Student's present class year: M1 M2 M3 M4

I. Are you requesting a copy of your

_____ Entire academic record

_____ Selected components (to be identified below):

_____ Original AMCAS Admissions Application

_____ Registration changes; Add/drop Registration Requests

_____ Request for Student name, address or other demographic data changes

_____ Past letters of good standing

_____ Past letters of enrollment verification

_____ Degree/graduation verification

_____ Documentation of request for grade appeal and final grade decision

_____ Final decision letters of Changes in Student Status (Leaves of Absence)

_____ Medical Student Evaluation Committee (MSEC) Final Decision(s)

_____ Subcommittee on Honor Code and Professionalism final decision(s)

_____ Medical Student Performance Evaluation (MSPE) for M4 students

_____ Unofficial Transcript

_____ Photocopy of MD Diploma

II. Are you requesting for another individual to view your records:

Name of Individual Authorized to view Records (if any) other than student: _____

Which records are you requesting another individual to view?

_____ Entire academic record

_____ Selected components (to be identified below):

_____ Original AMCAS Admissions Application

_____ Registration changes; Add/drop Registration Requests

_____ Request for Student name, address or other demographic data changes

_____ Past letters of good standing

_____ Past letters of enrollment verification

_____ Degree/graduation verification

_____ Documentation of request for grade appeal and final grade decision

_____ Final decision letters of Changes in Student Status (Leaves of Absence)

_____ Medical Student Evaluation Committee (MSEC) Final Decision(s)

_____ Subcommittee on Honor Code and Professionalism final decision(s)

_____ Medical Student Performance Evaluation (MSPE) for M4 students

_____ Unofficial Transcript

_____ Photocopy of MD Diploma

III. Student Request to Contest Accuracy of Records:

Date of Request: _____

Student Contesting Accuracy of Record: _____

Item Being Contested: _____

Reason for Request to Contest:

Student Signature: _____

Original Copy to be maintained in the academic record