## Massachusetts Firefighting Academy ~ Registration Department P.O. Box 1025, State Road, Stow, Massachusetts 01775 Phone: (978) 567-3200 Fax: (978) 567-3229

Email: mfa.registration@state.ma.us

## REQUEST FOR STUDENT RECORDS

Complete this form and fax, scan and email or mail it to us using the contact information above. We will research your student records and provide you with a letter attesting to courses you have completed with the Academy. You may request that the original letter be sent to another individual or institution (see required waiver) and a copy of the letter will be mailed to you, otherwise the original letter will be mailed to you. Note: The MFA database only holds records from late 1999 to present. Any courses completed prior to this will require additional time to research the files. Please provide a list of courses to aid in the research process. In order to ensure security, you must provide a photocopy of your license or other official photo identification to obtain your records.

STUDENT INFORMATION:			
LAST 4 DIGITS SS #, DL # or MFA STUDENT ID #:	Р	PHONE NUMBER:	
	_		
LAST NAME, FIRST NAME, MIDDLE INITIAL:			
MAILING ADDRESS:			
		.	
CITY	STATE	ZIP CODE:	
	1 1 1 1		
I have attached a list of courses that I completed be completed along with any additional information you STUDENT SIGNATURE:	may have.)	t must include the cou	•
Additional:			
I need a record of my career recruit grades for collections.	no crodit		
☐ Please mail a copy of my records to address listed below		ver form must be include	ed.
NAME OR INSTITUTION:			
MAILING ADDRESS:			
		.	
CITY	STATE	ZIP CODE:	
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## WAIVER FOR REQUEST FOR STUDENT RECORDS

I,, do hereby authorize the			
disclosure and/or release of any or all of my requested records, or any part thereof to be sent to the			
previously named individual/organization at the address provided. This consent is given whether the			
said records are public, private, or confidential in nature.			
I agree to indemnify and hold harmless the Commonwealth of Massachusetts, Department of			
Fire Services, its agents and employees from and against all claims, damages, losses, and expenses			
including all reasonable attorneys' fees arising out of or by reason of complying with this request.			
STUDENT SIGNATURE:			
ADDRESS:			

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June 2009