

**SAMPLE 1**  
**ANYTOWN PUBLIC LIBRARY**  
**CUSTODIAL PARENT/GUARDIAN CERTIFICATION**  
**FOR ACCESS TO CHILDREN'S RECORDS**

I, \_\_\_\_\_  
(Requestor's Name)  
\_\_\_\_\_  
(Requestor's Street Address)  
\_\_\_\_\_  
(City/State/ZIP)  
\_\_\_\_\_,  
(Phone)

hereby certify that I am the custodial parent or guardian of:

\_\_\_\_\_  
(Child's Name)  
\_\_\_\_\_  
(Child's Street Address)  
\_\_\_\_\_  
(City/State/ZIP)  
\_\_\_\_\_,  
(Date of Birth)

and, furthermore, I certify that I have not been denied periods of physical placement with the child under s 767.24(4).

Pursuant to 43.30 Wisconsin Statutes, I, the above certified parent or guardian, hereby request to review the following library records pertaining to \_\_\_\_\_'s use  
(Child's Name)  
of the library's documents or other materials, resources, or services:

Information requested (What specific record(s) about your child's library use are you asking for?):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*The Library will not release personal information about this child.*  
*The Library maintains only current records on customer use of the Library.*

<b>For Staff Use Only:</b>	
Request submitted to: _____ (staff person accepting request)	Date: _____
Request granted by: _____	Date: _____
Request referred to: _____	Date: _____
Request denied by: _____	Date: _____