APPLICATION FOR PUBLIC ACCESS TO RECORDS

TO: RECORDS ACCESS OFFICER

Name of Agency			
Address			
I hereby apply to inspect the foll	owing record(s)		
For the following purpose(s)			
Print Name	Signature	Date	
Representing Mailing Address			
	For Agency Use C	•	
□ Approved Inspection□	Approved for Copies	Pages at \$	per page
Total Received \$			
Denied (for the reason(s) checked	d below)		
 Confidential Disclosure Files Unwarranted Invasion of Personal Privacy 		Part of Investigatory	
 Chwarranted invasion of Pers Record of which this agency i Record is not maintained by t Exempted by statute other that Other (Specify)	is legal custodian cannot b his agency In the Freedom of Informa	tion Act	
Signature, Records A			Date

NOTICE: You have a right to appeal a denial of this application to the Superintendent of Schools, who must fully explain his/her reasons for such denial in writing within ten business days of receipt of an appeal.

Name

Business Address

I hereby appeal:

Signature

Date