INDEPENDENT SCHOOL DISTRICT NO. ___ PUBLIC DATA REQUEST FORM

TO BE COMPLETED BY THE REQUESTOR

| REQUESTOR NAME (NOT REQUIRED): | PHONE NUMBER:* |
|--|--------------------------|
| ADDRESS:* | EMAIL ADDRESS:* |
| DATE OF REQUEST: | |
| DESCRIPTION OF THE INFORMATION REQUESTED: (attach additional page if necessary) | |
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| MANNER IN WHICH RESPONSIVE DATA IS TO BE PROVIDED: | |
| INSPECTION ONLY COPIES ONLY**BOTH | INSPECTION AND CODIES ** |
| **Inspection is free, but there is a charge for copies. Payment must be received before copies will be provided. | |
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| | |
| FOR OFFICE USE ONLY | |
| DATE REQUEST RECEIVED: | REQUEST RECEIVED BY: |
| DATE OF RESPONSE: | RESPONSE PROVIDED BY: |

^{*} Requestor's name is optional. However, contact information is necessary to mail/email the data. Also, contact information is needed if the school district does not understand the request. We will not work on such a request until clarified.