



Folsom Cordova Unified School District
Serving Students • Supporting Communities • Leading Educators

REQUEST FOR PUBLIC INFORMATION

Date Request Received: _____ Request Submitted: Verbally Written

FCUSD staff taking request: _____

Name of requester: _____

Address: _____

Phone: _____

E-mail: _____

Description of item(s) requested:

Date Request Fulfilled: _____

FCUSD staff fulfilling request: _____

Note: If FCUSD site or department possesses the requested records, they will be made available for physical inspection during regular business hours. Documents may not leave the premises. If the requested needs photocopies, FCUSD cost recovery rate is 15 cents per page.

*The requester does not have to provide address, phone or e-mail, but such contact information will help expedite the request.