



REQUEST FOR PUBLIC RECORDS

Date: _____

Requestor's name: _____

Mailing address: _____

City, State, ZIP: _____

Phone Number: _____

Email address: _____

Name and detailed description of information requested:

I request to inspect the record(s).

I request copies of the record(s). I agree to pay the costs of providing records per Stanwood-Camano School District Procedure 4040P — Public Access to District Records.

Requestor's signature: _____

Date: _____

Return completed form to scsinfo@stanwood.wednet.edu

Or mail the form to:

Public Records Officer
Stanwood-Camano School District
26920 Pioneer Highway, Stanwood, WA 98292

Please refer to Stanwood-Camano School District [Policy](#) and [Procedure](#) 4040/4040P Public Access to District Records for complete information on the process for public access to school district records and guidance on how the District will respond to such requests.