INDEPENDENT SCHOOL DISTRICT NO. 2170

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)	
MANNER IN WHICH RESPONSIVE DATA IS TO BE PROVIDED: **PREPARATION ONLY**_____ **COPIES ONLY****_____ **BOTH PREPARATION AND COPIES**_____** ** Payment must be received **before** copies will be provided. The actual cost of making copies includes employee time, the cost of the materials onto which the data is copied (paper, CD, DVD, etc.), and mailing costs (if any).	

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.