



Santa Rosa Independent School District Request for Public Information

Requestor Name: _____ Date: _____

Please provide at least **one** of the following: a mailing address; a telephone number; a facsimile number; and/or, an email address so that Santa Rosa ISD has a method of communicating with you to efficiently and promptly furnish the information you requested.

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone Number: _____ Facsimile Number (FAX): _____

Electronic Mail Address (E-MAIL): _____

"Public Information" means information that is collected, assembled, or maintained under a law or ordinance or in connection with the transaction of official business by the Board or for the Board and to which the Board has a right of access. [Gov't Code 552.002(a) and GBA (Legal)]

The District shall "promptly" produce readily available public information for inspection, duplication, or both on application by any person to the Superintendent. "Promptly" means as soon as possible under the circumstances, that is, within a reasonable time, without delay, not to exceed ten business days. In the event the information is stored, will require programming or manipulation of data, or otherwise is not readily available, an estimation of the time when the information will be available will be given.

Please clearly and concisely describe the information being requested.

Please check or indicate: _____ inspection only _____ number of copies/sets requested*

If you are requesting copies, please indicate below whether you prefer: (a) to pick-up the information in person at the Administration Building, 102 Jesus R. Cruz St. Santa Rosa, TX, 78593, during our regular business hours; or, (b) for SRISD to send the information to you (postage & handling charges may apply).

Please check or indicate: _____ Requestor to pick up **OR** _____ SRISD to send

* Please note that if copies are requested, the charge for standard-paper copies is \$.10 per page. Please refer to Santa Rosa ISD policy GBA (EXHIBIT) for additional information on charges including postage & handling fees and/or to obtain information regarding charges for nonstandard copies.

To Be Completed by Administration Office

District person handling request: _____

Request: ___ approved ___ information not available ___ requesting a ruling from the Texas Attorney General

Date Information Furnished/Request Completed _____

Anticipated date information not readily available will be given to requestor _____

Fee _____ (if any)