

APPLICATION FOR ACCESS TO RECORDS

To: Records Access Officer, Fire Island Union Free School District
P.O. Box 428, Ocean Beach, NY 11770-0428

I hereby apply to inspect the following record (where possible furnish title, date, or other descriptive information to aid in identifying the record):

Please provide these records to me: (select one) ☐ Paper copy @ 25 cents per page
☐ Electronically
☐ In person (please call for appointment)

I certify that the purpose of the examination is not to obtain names and addresses for commercial or fund-raising purposes.

Signature

Date

Representing

Mailing Address

Email Address

Phone

FOR AGENCY USE ONLY

Approved ☐

Denied (for the reason(s) checked below:

- ☐ Confidential Disclosure
- ☐ Unwarranted Invasion of Personal Privacy
- ☐ Record Of Which This Agency Is Legal Custodian Cannot Be Found
- ☐ Record Is Not Maintained By This Agency
- ☐ Exempted By Statute Other Than The Freedom Of Information Act
- ☐ Part Of Investigatory Files
- ☐ Other (specify): _____

Signature

Title

Date

NOTICE: You have a right to appeal a denial of this application within 30 days to the Superintendent of Schools, Fire Island UFSD, P.O. Box 428, Ocean Beach, NY 11770-0428, who must fully explain the reasons for such denial in writing within 10 business day of receipt of the appeal.