

# Data/Media Request Form

2025/2026

Date of request _____
Your first and last name _____
Email address _____
Phone number (    ) _____
Clear description of the data requested.     
Additional information that may help fulfill this request.     
Are you requesting data about yourself or about a student for whom you are a parent or guardian?     
How would you like to receive your data, if available?  <input type="checkbox"/> Mail (includes charges): Provide mailing address.  _____
<input type="checkbox"/> Email _____
Name of the organization you represent    