

Rockville Centre Union Free School District
Rockville Centre, New York 11570

APPLICATION FOR PUBLIC ACCESS TO RECORDS

To: Records Access Officer-Rockville Centre Union Free School District
I hereby apply to inspect the following record(s):

If Record Purchased:
(\$.25 per page, \$5.00 per audio tape
& \$20.00 per video tape)

No. of copies _____

No. of pages _____

Charges _____

Recd. Payment _____

Receipt No. _____

_____ *Print Name*

_____ *Date*

_____ *Signature*

_____ *Representing*

_____ *Mailing Address*

_____ *Telephone Number*

FOR AGENCY USE ONLY

APPROVED

DENIED (for the reason(s) checked below)

- | | | | |
|--------------------------|--|--------------------------|-----------------------------|
| <input type="checkbox"/> | Confidential Disclosure | <input type="checkbox"/> | Part of Investigatory Files |
| <input type="checkbox"/> | Unwarranted Invasion of Personal Privacy | | |
| <input type="checkbox"/> | Record of Which This Agency is Legal Custodian Cannot be found | | |
| <input type="checkbox"/> | Record is not Maintained by This Agency | | |
| <input type="checkbox"/> | Exempted by Statute Other Than the Freedom of Information Act | | |
| <input type="checkbox"/> | Other (specify) _____ | | |

_____ *Signature*

_____ *Title*

_____ *Date*

Notice: You have a right to appeal a denial of this application to the head of this agency.

_____ *Supt. of Schools*

Admin. Offices: 128 Shepherd Street
Rockville Centre, N.Y. 11570-2298

_____ *Name*

_____ *Business Address*

Who must fully explain his reasons for such denial in writing seven days of receipt of an appeal.

I HEREBY APPEAL

_____ *Signature*

_____ *Date*