

EAST QUOGUE UNION FREE SCHOOL DISTRICT

APPLICATION FOR PUBLIC ACCESS TO RECORDS

Records Access Officer
East Quogue U.F.S.D.
6 Central Avenue
East Quogue, NY 11942

In accordance with the Freedom of Information Law and the policy of the East Quogue Board of Education, ***I HEREBY APPLY*** to inspect and/or copy the following record(s).

RECORDS REQUESTED: _____

DATE REQUESTED: _____

NAME OF INDIVIDUAL: _____

NAME OF GROUP/GOVERNMENTAL AGENCY: _____

ADDRESS: _____

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

I further understand that there is a charge of 25 cents per copy (no charge for copies made to governmental agencies) according to Board Policy.

SIGNATURE

REPRESENTING

FOR DISTRICT USE ONLY

APPROVED _____

DENIED _____

REASONS:

- | | |
|--------------------------------------|-------------------------------------|
| _____ Confidential disclosure | _____ Invasion of personal privacy |
| _____ Records cannot be located | _____ Records no longer in District |
| _____ Records are not kept at EQUFSD | _____ Records are exempt by statute |
| | _____ Other (specify) |

APPEAL PROCESS

You have a statutory right to appeal denial of this application to the East Quogue Board of Education. I understand that I will receive reasons for denial in writing within seven (7) days of receipt of this appeal.

I, _____, hereby appeal the denial of information records listed above.

Signature: _____ Date: _____

Adopted: December 15, 1998