

Chickasha Public Schools

BA-F1

DISTRICT FORM

OPEN RECORDS REQUEST

Requestor Information

Name	Organization	Date
Phone Number	Address	
Fax/email	Availability for an in-person appointment:	

Records Description

<i>Is request solely for commercial purpose? (circle one): YES or NO</i>
<p>Indicate record(s) description and/or name of documents below including:</p> <ol style="list-style-type: none">1. A general time frame within which the requested records would have been created or transmitted.2. Identifiable record, rather than general information without any qualifiers or other specifications, and3. Search terms that are sufficiently specific to assist the public body in identifying the requested records. <p>Note: <i>Any requests that are still not reasonably specific, after a request to clarify, or that are not legally disclosable, may be denied.</i> (Board Policy BA)</p>

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Office Use Only

Number of pages		Date/Time for in-person appointment:
Duplication cost per page:	_____ \$0.50 _____ \$1.00-certified	
Duplication cost	\$	
Search time (hours)*		Search time and direct costs must be approved by the custodian of Public Records only (Initials _____)
Document search rate \$30 per hour*	\$	
Document search cost*	\$	
Other direct costs*	\$	
Total Amount Due	\$	

Approval

Custodian of Public Records or designee approval		Date	
Date submitted		Date payment received	