

APPLICATION FOR PUBLIC ACCESS TO RECORDS

Date

TO: Records Access Officer
Mattituck-Cutchogue Union Free School District
385 Depot Lane
Cutchogue, NY 11935

In accordance with Chapters 578, 579 and 580 of the Laws of 1974, and the policy of the Board of Education of the Mattituck-Cutchogue School District, I would like to inspect and/or copy the following records listed below. I understand that this inspection will be in the presence of the Records Access Officer of the Mattituck-Cutchogue School District, or his/her designee. I understand that any copies of records made for me by the school district will be at the cost of 25 cents per sheet run.

Records desired:

Date requested for inspection: _____

Time requested for inspection: _____

Number of people involved: _____

Signed: _____

Representing: _____

Mailing address: _____

For Agency Use Only

Approved _____

Denied for the reason(s) checked below:

- _____ Confidential Disclosure
- _____ Part of investigatory files
- _____ 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
- _____ Other (specify)

Signature _____ Title _____ Date _____

NOTICE: YOU HAVE A RIGHT TO APPEAL A DENIAL OF THIS APPLICATION TO THE HEAD OF THIS AGENCY.

Name _____ Business address _____
WHO MUST FULLY EXPLAIN HIS/HER REASONS FOR SUCH DENIAL IN WRITING SEVEN DAYS OF RECEIPT OF AN APPEAL.

I hereby appeal _____
Signature _____ Date _____