

KENT SCHOOL DISTRICT
REQUEST FOR PUBLIC RECORDS

Date _____

Name of Requesting Party _____

Address of Requesting Party _____

Phone Number _____

Email Address: _____

Specific Documents Requested

Purpose of Request _____

I understand that any documents provided pursuant to my request that contain a list of individuals may not be used for commercial purposes (RCW 42.56.70(9)). I agree not to use any such documents for commercial purposes and further agree not to give, sell, or provide access to these documents to any other person who intends to use or uses the list for commercial purposes.

Signature of Requesting Party

DECISION OF SCHOOL/COMMUNITY RELATIONS OFFICE

_____ Request approved. Records are available at _____

_____ Request denied. Statement attached.

Date

Signature of School/Community Relations

DOCUMENTATION BY RECORDS COORDINATOR

Documents inspected: _____

Costs, if documents copied: _____

Date: _____ Signature of Records Coordinator _____