## POTTSGROVE SCHOOL DISTRICT Right-To-Know Request Form

PLEASE READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM. A PROPERLY COMPLETED FORM SUBMITTED TO THE SCHOOL DISTRICT WILL BE CONSIDERED A WRITTEN REQUEST FOR PURPOSES OF THE RIGHT TO-KNOW ACT, 66 P.S.§ 66.1 et seq

## Section 1 - Requester Information - <br> To be completed and signed by the Requester at the time submitted to the School District.

| Name of Organization Requesting Information: |  |  |
| :--- | :--- | :--- |
| Print Name: LAST | FIRST | Middle Initial |
| Address (Street Name \& Number) | State (must be PA) |  |
| City | E-Mail Address (Optional) |  |
| Telephone Number (Optional) | Requester's Signature |  |
| Date (Month/Day/Year) |  |  |
| Section 2 - Description of Document(s) Requested - To be Completed by the Requester <br> - Attach additional pages if necessary. |  |  |

Section 3 - Inspection, Copying or Certified Copy of Public Records - To Be Completed by the Requester - Please check each box applicable to your request.

Inspection of Documents
Copy of Documents
Certified Copies of Documents

Written Request Submitted:
$\square \quad$ In Person
By Mail
By Facsimile at:
By E-mail at:
Section 4 - OFFICE USE ONLY. To be completed by authorized School District personnel for each written request. [lf $\quad$ request not made on District form, attach request.]


