

**CROSSLAKE COMMUNITY SCHOOL
PUBLIC DATA REQUEST FORM**

To be completed by the Requestor

Requestor Name (Not Required):	Phone Number:*
Address:*	Email Address:*
Date of Request:	
Description of the Information Requested: (attach additional page if necessary)	
Manner in which responsive data is to be provided:	
Inspection Only _____ Copies Only** _____ Both inspection and copies** _____	
**Inspection is free, but there is a charge for copies. Payment must be received before copies will be provided.	

For Office Use Only

Date Request Received:	Request Received By:
Date of Response:	Response Provided By:

* Requestor's name is optional. However, contact information is necessary to mail/email the data. Also, contact information is needed if the school district does not understand the request. We will not work on such a request until clarified.

Approved:
1/9/2023