YORK ACADEMY REGIONAL CHARTER SCHOOL RIGHT-TO-KNOW REQUEST FORM



DATE REQUESTED:				
REQUEST SUBMITTED BY:	□ E-MAIL	□ U.S. MAIL	□ FAX	□ IN-PERSON
REQUEST SUBMITTED TO (Ag	ency name & add	dress):		
NAME OF REQUESTER :				
STREET ADDRESS:				
CITY/STATE/COUNTY/ZIP(Req	uired):			
TELEPHONE (Optional):		_ EMAIL (optional)	:	
RECORDS REQUESTED: *Provi		detail as possible so th	e agency can ide	ntify the information.
	-			
DO YOU WANT COPIES? YE	S □ NO			
DO YOU WANT TO INSPECT T	HE RECORDS?	□ YES □ NO		
DO YOU WANT CERTIFIED CO	PIES OF RECOR	DS? □ YES □ NO		
DO YOU WANT TO BE NOTIFIE	D IN ADVANCE I	F THE COST EXCEE	:DS \$100? □ YI	ES □ NO
		Y OF THIS REQUES YOU WOULD NEED		
	FOR SC	HOOL USE ONLY		
OPEN-RECORDS OFFICER:				
□ I have provided notice to appro	opriate third partie	s and given them an o	pportunity to ob	eject to this request
DATE RECEIVED BY THE SCH	OOL:			
SCHOOL FIVE (5) BUSINESS D	AY RESPONSE I	DUE:		

**Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)