## **PUBLIC RECORDS REQUEST Freedom of Information Act (FOIA)**



Today's Date					
Requestor					
Name					
Address		City	State	Zip	
Phone		Email			
Information Reque	ested				
	cifically the document(s) you any respond to your request app	are requesting a copy of or requesting propriately.	ng to review, providing as	s much detail as	
	es are requested for documents	available online, fees for searching,	locating, examining and co	opying such	
records will apply					
Paper mailed to address above Digita		Digital emailed to address abo	ve		
Pick up Other		Other (please specify)			
Requestor's Signature			Date		
Office Use					
Date Received		Required Respons (5 business days Extension Respo (10 additional bu	onse Date		
Response		Date Sent			
Response Type:	☐ 10-Day Extension				
	Estimate Provided				
	Clarification of Request				
	Requested Information Pro	ovided			
	☐ Denial				

Written FOIA requests should be sent to the Superintendent of Schools, Attention FOIA Coordinator at Rockford Public Schools, 350 N. Main Street, Rockford MI 49341. Requests can also be faxed to the office at 616-866-1911 or emailed to JNester@Rockfordschools.org.