



PROVO SCHOOL DISTRICT REQUEST FORM

5220 F1

Note: Provo City School District requires a person making a records request furnish the district with a written request containing the requester’s name, mailing address, daytime telephone number (if available); and a description of the specific record requested.

Requester’s information:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/zip: \_\_\_\_\_

Daytime telephone number: \_\_\_\_\_ Cell \_\_\_\_\_

Request made to Provo School District 280 W 940 North Provo, UT 84604.

Note: The more specific and narrow the request, the easier it will be for the District to respond to the request. If you are unsure about the records’ description, contact the records officer.

Records requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of records including all relevant information—location of event(s) described in records, city, county, address; date range of the records; names of the person(s); and subject of the request.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY

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Name of Processor: \_\_\_\_\_ Title: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Due: \_\_\_\_\_

Records Provided:  
\_\_\_\_\_  
\_\_\_\_\_

Date Provided: \_\_\_\_\_ By Name: \_\_\_\_\_ Title: \_\_\_\_\_

(If applicable)

Approved GRAMA Records Officer: \_\_\_\_\_ Date: \_\_\_\_\_

If HR Records: Approved by Deputy Superintendent: \_\_\_\_\_ Yes No Date: \_\_\_\_\_