

EAST PENN SCHOOL DISTRICT  
800 Pine Street, Emmaus, PA 18049

**STANDARD RIGHT - TO - KNOW REQUEST FORM**

DATE REQUESTED: \_\_\_\_\_

REQUEST SUBMITTED BY: E-MAIL      U.S. MAIL      FAX      IN-PERSON

NAME OF REQUESTOR: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY/STATE/COUNTY (Required): \_\_\_\_\_

\_\_\_\_\_

TELEPHONE (Optional): \_\_\_\_\_

RECORDS REQUESTED (Provide as much specific detail as possible so the school district can identify the information):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DO YOU WANT COPIES? YES OR NO

DO YOU WANT TO INSPECT THE RECORDS? YES OR NO

DO YOU WANT CERTIFIED COPIES OF RECORDS? YES OR NO

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OPEN RECORDS OFFICER: CECILIA R. BIRDSELL

DATE RECEIVED BY SCHOOL DISTRICT: \_\_\_\_\_

AGENCY FIVE (5) - DAY RESPONSE DUE: \_\_\_\_\_

January 1, 2009