

Freedom of Information Act Request form

On the 15TH day of December, year 2014, at the hour of _____ M, the following individuals appeared in person at the office of Schiller Park School District 81 and requested the following records:

Name Diana Caffero Phone _____
Address _____ City Schiller Park

Records sought:

Complaint, Investigation, including results of and corrective actions, and any other reports from and including ISBE onsite visit also.

Paper copy from paper or <u>electronic source (50) pages or less</u> ^{OKN-1}	No charge
Paper copy from paper or electronic source (51) pages or more	\$.15 per page
Copy of audio or video material	Cost of media

Diana M. Caffero
Requestor's Signature

Employee Signature and Title _____

The records may take up to five days to assemble. District office staff will notify you when the items are available.

Numbers of copies made _____ Cost \$ _____

I hereby certify the above requested records were presented to me, for inspection or copies provided on _____ day of _____, year _____.

Requestor's Signature _____

Checks are made payable to School District 81

If additional time is needed, we will notify the requestor in writing within 5 business days after the receipt of the request of the statutory reason for the extension and when the requested information will be produced.