GREENVILLE PUBLIC SCHOOLS
Greenville, Michigan

FREEDOM OF INFORMATION ACT RECORDS REQUEST

Date __________________

1. Name of Requester ______________________________________________________
   Street Address  ______________________________________________________
   City, State, Zip  ______________________________________________________
   Telephone Number (___) ________________________ E-mail ___________________

2. The following official school records are requested;
   _______________________________________________________________________
   _______________________________________________________________________

3. Where information is to be sent (if different from above):
   Name   _______________________________________________________
   Street Address  _______________________________________________________
   City, State, Zip  _______________________________________________________

4. Fees:

   Fees for responding to a request shall be assessed as follows:
   
   A. Photocopying charges of 10 cents per page, or if the nature of the duplication necessitates duplication by outside sources, the actual cost of employing such outside sources.
   
   B. Actual mailing costs.
   
   C. Labor costs incurred in duplication and mailing assessed at the hourly wage of the lowest paid employee of the District capable of retrieving, copying, and mailing the information necessary to comply with the request, and not more than the maximum hourly amount articulated in law.
   
   D. Labor costs (including fringe benefit costs) for search, examination, review, and deletion or separation of exempt from non-exempt information, at the hourly wage of the lowest paid employee of the District capable of complying with the request. Such labor fees shall be charged only when the request requires more than $50.00 of labor. In such cases, the coordinator shall identify the nature of this unreasonably high labor cost.

   Upon receiving a request, the coordinator shall inform the person making the request of the estimated cost for processing the request. If the estimated cost exceeds $50.00, the coordinator shall require a good faith deposit of one half of the estimated fee before processing the request.

   No charge for the first $20.00 of a fee shall be made to an individual who proves indigence or receipt of public assistance. State guidelines for determining free and reduced cost meals to families shall be used as guidelines to determine indigence.
A record of fees paid shall be kept along with each request. A record of fees incurred shall be kept for any person making a request who is exempt from initial fees as a matter of Board policy, though such fees will not be charged except those in excess of the yearly maximum. This record shall be provided on a standard form with detailed itemization that complies with applicable law.

Revenue from copying open records shall be deposited monthly in the general fund of the District.

5. **Approval or Denial:**
   - Request Approved
   - Request Denied

   Reason for Denial

   __________________________________________________________________________
   __________________________________________________________________________

   ___________________________________________   ________________________________
   Date      Superintendent’s Signature

POLICY ADOPTED:  September 10, 1990
                 June 13, 2005
                 Moved to AR May 11, 2015