

**Request for Public Access to Records**

**To:** Records Access Officer  
Massapequa Union Free School District  
4925 Merrick Road  
Massapequa, NY 11758

Name \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

I request the following records for:  inspection only     inspection and reproduction (Fee applies. See below)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

**Request Approved** Fee \$ \_\_\_\_\_

**Request Denied** (for reason(s) checked below):

- |  |   |
|--|---|
| <input type="checkbox"/> Confidential Disclosure                                       | <input type="checkbox"/> Part of investigatory files  |
| <input type="checkbox"/> Constitutes an unwarranted invasion of personal privacy       | <input type="checkbox"/> Record is not maintained by this agency                                      |
| <input type="checkbox"/> Record of which this agency is legal guardian cannot be found | <input type="checkbox"/> Disclosure would impair imminent contract/collective bargaining negotiations |
| <input type="checkbox"/> Exempted by Federal or State Statute                          |   |
| <input type="checkbox"/> Other (specify) _____   |   |

**Records Access Officer**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

This request for records will be fulfilled in compliance with the Freedom of Information Law (Public Officers Law Art. 6 §§ 84-90). Within five business days of the District's receipt of your written request, it shall either make such record(s) available to you, deny your request in writing, or furnish you with an acknowledgement of receipt of your request and the approximate date, which shall be reasonable under the circumstances of the request, when your request will be granted or denied. If the District determines to grant your request in whole or in part and if circumstances prevent disclosure within twenty business days from the date of the District's acknowledgement of receipt of your request, it may in writing state both the reason for its inability to grant your request within twenty business days and a date certain within a reasonable period, depending of the circumstances, when the request shall be granted in whole or in part. Copies of records will be made at a cost of 25 cents per page.

You have the right to appeal a denial of this application within 30 days of its receipt to the Superintendent of Schools, 4925 Merrick Road, Massapequa, NY 11758, who may grant access or continue the denial. In the case the denial is continued, the Superintendent will fully explain his/her reasons in writing within 10 school days of receipt of this appeal. The district will also file each appeal and its determination with the Committee on Open Government, 41 State Street Albany, NY 12231. Anyone dissatisfied with the district's final decision on a request for access to records may appeal the decision to the Nassau County Supreme Court.

I hereby acknowledge receipt of the requested records:

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

I hereby appeal: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date