

Riverhead Central School District
Application for Public Access to Records
Freedom of Information (FOIL)

To: Records Access Officer
Riverhead Central School District
700 Osborn Avenue
Riverhead, NY 11901
Email: FOIL@riverhead.net

PLEASE CHECK ONE:

- I hereby apply to inspect only the following record(s)
- I hereby apply to inspect and request reproduction of the following record(s) @ 25 cents per page*

PLEASE BE AS SPECIFIC AS POSSIBLE WHEN IDENTIFYING THE REQUESTED RECORDS:

Signature: _____ Date: _____

Please **print** name: _____

Mailing address: _____

Email address: _____ Phone number: _____

FOR OFFICE USE ONLY

- Approved
- Denied (for the reason(s) checked below)
 - Confidential disclosure
 - Part of investigatory files
 - Unwarranted invasion of personal privacy
 - Record of which this agency is legal custodian cannot be found
 - Record is not maintained by this agency
 - Exempted by statute other than the Freedom of Information Law
 - Other (specify) _____

Signature/Title _____ Date _____

Notice: You have a right to appeal a denial of this application to the Superintendent of School, Riverhead Central School District, who must fully explain his/her reasons for such denial in writing within ten days of receipt if an appeal.

I hereby appeal:

Signature _____ Date _____