RECORDS ACCESS REQUEST FORM

Under The Freedom of Information Law

Michaela Frederick, Records Access Officer
Jefferson Community College
1220 Coffeen Street, Watertown, NY 13601
mfrederick@sunyjefferson.edu / Fax: (315) 786-0158

Date: _____

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request access to the following records:

_____

_____

_____

(Identify the records in which you are interested as clearly as possible)

☐ **(Check here if copies are requested)** In addition I further request copies of the identified records and agree to pay a copying charge for all copies requested at a rate of $.25 per page for copies not exceeding 9" x 15".

The Freedom of Information Law requires that you receive a response to your request within five business days of receipt of your request. If for any reason any portion of your request is denied, you will be informed of the reasons for the denial in writing. You may appeal a denial to the appeals officer identified below.

Signature: _____ Name: _____
(Please Print)

Address: _____

DETERMINATION OF RECORDS ACCESS OFFICER

Your request for access to the records specified above is hereby:

☐ **Approved** The requested records will be available for your inspection on _____ at_____. The total copying charge for the records requested is $_____. Copies will be available within _____ days from the date that payment of the copying charge is received. Checks should be made payable to: Jefferson Community College

☐ **Denied** The reason(s) for denial are as follows:

_____

_____

_____

If you wish to appeal this denial the Records Access Appeals Officer is:
Daniel J. Dupee II, President
Jefferson Community College
1220 Coffeen Street, Watertown, NY 13601
to whom a written appeal should be sent within thirty days of the date of the denial.

_____ _____
Records Access Officer Date