

JACKSONVILLE STATE UNIVERSITY

Request for Access to Public Records

Jacksonville State University is committed to making public records available in a timely manner upon proper request. The Alabama Supreme Court has held that a public body as defined in the Public Records Act may require a person making access to public records to submit a written application and give a reason for seeking the record.

Certain records are protected from disclosure by state or federal law and will not be made public. If a record has both exempt (protected) and non-exempt (unprotected) information, the portion of the record containing the protected information will be redacted and the remainder produced. Personal information of individuals will, likewise, be redacted in accordance with University policy.

Reasonable restrictions on the time and place of inspection may be set, and a fee will be charged for costs associated with the production of copies. If you wish to inspect records without copies being provided, your request may be delayed until such time as an appropriate staff member can be present to assist you, and to maintain the integrity of records.

Please complete the following and mail or e-mail to the JSU public records designee:

1. I request the following records from Jacksonville State University (be specific):

Please see email.

2. I request these documents and records for the following purpose:

Please see email

3. I am requesting these documents (select one):

☒ For myself

☐ For the following individual or entity: _____

4. I would like to (select one):

☐ Inspect these records in person at a time to be scheduled.

☒ Have copies of these records produced to me.

5. I understand the University charges \$1.50 per page to recover the costs associated with producing public records. Initials: E

Note: Jacksonville State University will not charge for requested assistance necessary to comply with the Americans with Disabilities Act.

By completing this request, I certify that the records requested are for use by the person/entity named and for the purpose stated.



Signature: _____

Print Name: Ellen

Complete Address: _____

Telephone(s): 6172991832

Email: 101472-32865051@requests.muckrock.com

University Use Only

Received: ____ / ____ / ____ at ____ A.M. / P.M. By: _____

Notes: