## 194 South Street

## Plainville, MA 02762

### 

**Town of Plainville**

**Commonwealth of Massachusetts**



**PUBLIC RECORDS REQUEST FORM**

**All public records request will be responded to within ten (10) days after receipt of request.**

**Responses may indicate further time is necessary, additional information is required, or**

**an estimate of fees required to fulfill the request, as examples.**

Pursuant to Public Records Law all exemptions will be redacted from any and all material being released.

Thursday January 18, 2024

Date of Request:

1. An extract of your records management system or database that includes each school-related arrest and each referral to law enforcement conducted during the 2018-2019, 2019-2020, 2020-2021, and 2021-2022 school year (up until the day the records are produced). Specifically, we request an extract of the database to include the following columns:  
a. Date of arrest or referral to law enforcement  
b. Time of arrest or referral to law enforcement  
c. Charge (or charges)  
d. Whether the individual(s) was arrested or referred to law enforcement  
e. Sex of individual(s) arrested or referred to law enforcement  
f. Age of individual(s) arrested or referred to law enforcement  
g. Race of individual(s) arrested or referred to law enforcement  
h. Ethnicity of individual(s) arrested or referred to law enforcement  
i. Disability status of the individual(s) arrested or referred to law enforcement  
j. Whether the individual arrested or referred to law enforcement is a student at the school.  
k. Name of arresting officer, if applicable, and  
l. Badge number of the arresting officer or the officer that referred the youth to law enforcement, as applicable.

Description of

Materials Sought:

Requestors Information:

Joseph Steinbach

Name of Requestor:

Center for Public Interest, Advocacy, and Collaboration, NUSL

Firm / Company:

416 Huntington Ave

Address:

MA

City: State: Zip:

02115

Boston

617-373-2395

Phone number: Fax number:

N/A

Steinbach.j@northeastern.edu

Email:

Please be as specific as possible when requesting information:

COPY OF RECORDS

**X**

OTHER / ADDITIONAL INFORMATION:

**OFFICE USE:** Received by: Initial Response: Subsequent Reviews:

Fees: Paid: Records Provided: