LYNDONVILLE CENTRAL SCHOOL DISTRICT APPLICATION FOR PUBLIC ACCESS TO RECORDS

	CORDS ACCESS			
Nar	me of Agency	<u></u>		
Ādo	dress			
Thereby a	pply to inspect th	e following record(s)		
For the fo	llowing purpose(s	s)		
Print Nam		Signature		Date
Representing Mailing Address				
		**************************************	******	
[] Appro	oved Inspection	[] Approved for Copies	Cost \$	
Total Reco	eived \$	· 		
Denied (f	for the reason(s) c	hecked below)		
Unwa	rd of which this ag rd is not maintaind opted by statute ot	of Personal Privacy gency is legal custodian cannot be fo	und Act	
Signature, Records Access Officer			Date	
******* NOTICE:	You have a ri	********************************** ght to appeal a denial of this applica y explain his/her reasons for such de t of an appeal.	ation to the Supe	rintendent of Schools
Name		Busi	ness Address	
I hereby a	ippeal:			
	Signature	·-·	<u>D</u>	ate