



STRAWN INDEPENDENT SCHOOL DISTRICT

Public Information Request Form

| | |
|--|---|
| Name of person Requesting Information: | |
| Organization: | |
| Street Address: | |
| City/State/Zip: | |
| Telephone Number: | |
| Cell Number: | |
| Fax Number: | |
| Email Address: | |
| Preferred Format: | <input type="checkbox"/> Paper copy <input type="checkbox"/> Electronic Copy <input type="checkbox"/> Inspection Only |
| Preferred Method of Delivery: | <input type="checkbox"/> U.S. Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Pick up |
| Detailed Description of your Request: | |

***NOTE:** Certain exceptions to disclosure exist under the Texas Public Information act to protect against the disclosure of confidential or privileged information. If it appears that an exception to disclosure exists, an opinion will be sought from the Office of the Attorney General regarding your request.

You may submit the form by mail, fax, email, or in person:

| By Mail: | By Fax: | By Email: | In Person: |
|--|---|--|---|
| Strawn ISD Request for Public Information Attn: Katie Lynn P.O. Box 428 Strawn, TX 76475 | 254.672.5662 Attn: Katie Lynn Re: Request for Public Information | klynn@strawnschool.net Subject: Request for Public Information | Strawn ISD Central Office 224 E. Walnut St. Strawn, TX 76475 |