



Idaho State Board of Education

REQUEST FOR PUBLIC INFORMATION FORM

PLEASE COMPLETE THE SECTION BELOW

I HEREBY REQUEST, PURSUANT TO Idaho Code Section 9-338, to receive, examine, and/or copy the following public records/information:

I understand that this information cannot and will not be used for commercial purposes per Idaho Code Section 9-348.

(Printed Name)

(Signature)

(Date)

Mailing Address: _____ Home Phone: _____

_____ Work Phone: _____

_____ Fax: _____

E-mail: _____

Within 3 business days, the Office of the Idaho State Board of Education will either:

- 1. Provide the information requested.**
- 2. Acknowledge receipt of your request and indicate that a longer period of time is needed to locate or retrieve the records, but provide them to you no later than ten (10) working days following your request.**
- 3. Deny your request for cause.**

Return this form to: Blake Youde, Communications Officer

blake.youde@osbe.idaho.gov

Office of the State Board of Education

P.O. Box 83720

Boise, Idaho 83720-0037

Phone: 208-334-1591 Fax: 208-334-2632

Date Received: _____