



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:
Irving Independent School District Request for Public Information Attn: Erika Orr P.O. Box 152637 Irving, Texas 75015-2637	972-252-4754 Attn: Erika Orr Re: Request for Public Information	Recordsrequest@irvingisd.net Subject: Request for Public Information	Irving ISD Service Center Enterprise Content Management 3620 Valley View Lane Irving, Texas 75062