



2201 Morrie Avenue
Cheyenne, WY. 82001
307-632-2248

Public Record Request

Name of person requesting records _____

Phone # _____

Email Address: _____

Under the Wyoming Public Records Act (16-4-201 et seq.), I am requesting an opportunity to inspect or obtain copies of public records as described below:

Description of Record(s) Sought

_____ I would like to inspect records.

_____ I would like to receive copies of the record. I understand that I am responsible for the costs to provide the records and authorize costs up to \$ _____. I further understand that I will be contacted if the estimated costs are greater than the amount I have specified, and that the school will not respond to a request that I have not authorized adequate costs.

Copies of the information requested will be provided as soon as reasonably possible. I recognize this records request form is a public document.

Signature

Date