

KILGORE COLLEGE POLICE DEPARTMENT OPEN RECORDS / INFORMATION REQUEST FORM

Please print or type legibly:

Name of Requestor:	
Address:	
City/State/Zip Code:	
Phone Number:	
Date of Request:	
Email Address:	

Detailed Description of Information Sought (please be as specific as possible).

Case # (if applicable):	Date of Incident/Accident:

I request information as (select one):

- (a) _____ electronic format
- (b) _____ paper copies
- (c) _____ diskette, CD, DVD

Please deliver by:

- (a) _____ Pick up in person when notified
- (b) _____ Email (if possible)
- (c) _____ Review at KC campus (if possible)
- (d) _____ U.S. Mail (add. charges may apply)

Please note: If charges will apply, a cost estimate will be provided.

All requests must be in writing or via email and must be submitted to the Kilgore College Police Department, 1100 Broadway, Kilgore, Texas 75662, kcpd@kilgore.edu. I understand that the College is required to release only information, which currently exists, that is in its possession, and in its current state. The College is not required to compile or create specific information or formats for my use. I understand the College will make the information available as soon as reasonably possible, normally no more than 10 business days. Archived records, voluminous requests, and documents requiring redaction of non-public information may require a longer time for processing, and costs may be incurred by the requestor. I will receive notice of the need for an extension and an approximate time when the documents will be available.

Signature: _____

Date: _____

Portion below to be completed by KCPD Staff:

DATE RECEIVED BY KC: _____

Provided information via:

- ___ Viewed in person
- ___ Picked up copies
- ___ Faxed
- ___ Email
- ___ U.S. Mail

ACTION:

- ___ Sent to Attorney
- ___ AG Opinion requested
- ___ AG Opinion # ___ received
- ___ Sent estimate letter

DATE:

Fees assessed: \$ _____ Date Information Released: _____ PIO signature: _____