REQUEST FOR INSPECTION OF PUBLIC RECORDS

TO: MS. ALANA KYRIAKAKIS
    UNIVERSITY COUNSEL

FROM:
Your Name: _________________________________________________________
Address: ___________________________________________________________
Phone: _____________________________________________________________
E-Mail: _____________________________________________________________

Under the provisions of the Georgia Open Records Act, the undersigned hereby respectfully requests permission to inspect and/or copy the following records in the possession of _________________ at Southern Polytechnic State University.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

The undersigned person requesting such records agrees to pay to the institution a fee of ten cents ($0.10) per page for photocopy service and any additional fees required for certification of documents or for personnel costs associated with the search for and retrieval of such records (excluding the first 15 minutes).

This ______ day of __________, 20__.  

______________________________________________________________
Signature

Please send this request to Southern Polytechnic State University, Office of Legal Affairs, 1100 South Marietta Parkway, Marietta, GA 30060, return in person to Southern Polytechnic State University Office of Legal Affairs, Norton Hall, Office 316 or email to legal@spsu.edu.