## REQUEST TO EXAMINE/COPY PUBLIC RECORDS

## TO: Records Custodian College of Southern Idaho

DATE: $\qquad$
I hereby request, pursuant to Idaho Code § 74-102, to examine and/or copy the following public records:
$\qquad$
These records specifically pertain to myself.
I would like to merely examine these records.
I would like copies of these records.
I would like these records provided to me by email (if possible) at the email address below:

PRINT NAME: $\qquad$
COMPANY (if applicable): $\qquad$
ADDRESS: $\qquad$
Email Address: $\qquad$
Telephone number: $\qquad$
SIGNATURE: $\qquad$
I acknowledge by my signature that the records sought by this request will not be used for a mailing list or telephone list as set forth in Idaho Code § 74-120.
I further understand there may be costs associated with this request. Requests received after normal business hours or on weekends/holidays shall be deemed received the next business day.

Submit this form using one of the following methods:
Email a scanned copy as PDF to: info@csi.edu

[^0]
[^0]:    Mail a physical copy to:
    College of Southern Idaho
    ATTN: Matt Hartgrave
    PO BOX 1238
    Twin Falls, ID 83303-1238
    Drop off a physical copy at the main CSI campus to:
    College of Southern Idaho
    Matt Hartgrave
    Canyon 115
    315 Falls Ave.
    Twin Falls, ID 83301

