

Application for Public Access to Records

TO: Oxford Academy Board of Education Records Access Officer  
District Office  
PO Box 192  
Oxford, NY 13830

I hereby apply to inspect only or inspect and request reproduction of the following records:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Copying charges (which must be paid in advance) @\$.25 per copy \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

I hereby acknowledge receipt of the reproduction of records.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

**FOR OFFICE USE ONLY**

- Approved
- Denied (for the reason(s) checked below)
- Confidential disclosure
- Part of investigatory files
- Unwarranted invasion of personal privacy
- Record of which this agency is legal custodial cannot be found
- Record is not maintained by this agency
- Exempted by statute other than the Freedom of Information Act
- Other (specify) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE:** You have a right to appeal a denial of this application to the Superintendent and then the Board of Education of the Oxford Academy and Central School District who must fully explain the reasons for such denial in writing within ten days of receipt of an appeal.

I hereby appeal to the Superintendent: \_\_\_\_\_ / \_\_\_\_\_  
Signature Date

I hereby appeal to the Board of Education: \_\_\_\_\_ / \_\_\_\_\_  
Signature Date