

REQUEST TO INSPECT OR OBTAIN A COPY OF SOUTHERN ILLINOIS UNIVERSITY
RECORDS UNDER THE FREEDOM OF INFORMATION ACT OF THE STATE OF ILLINOIS

You may submit your request by mail, e-mail, or in person to: *Christina Sayles, FOIA Officer, c/o Budget Office, Southern Illinois University Carbondale, Anthony Hall Room 15, Mail Code 4313, Carbondale, IL 62901, csayles@siu.edu.*

Please print the following information.

Name _____
Organization _____
Address _____

Phone _____ office _____ home _____
E-mail address _____ Date request submitted: _____

If you are submitting a request on behalf of a business organization or financial institution, indicate below if that organization or institution issues credit and/or debit cards:

- _____ YES, my organization/institution issues credit and/or debit cards.
_____ NO, my organization/institution does NOT issue credit and/or debit cards.

DESCRIPTION OF RECORDS REQUESTED

Please be as specific as possible to insure that a meaningful search of University records can occur. Please supply dates, titles, file designations, or other appropriate information.

TYPE OF REQUEST (CHECK AS APPROPRIATE)

This request is to: _____ inspect the record(s); _____ obtain a copy of the record(s); or _____ obtain a certified copy of the record(s).

Signature of Requester Date

Inspection of records shall occur either at the location where the records are kept or in the designated FOIA office. There is no cost for the inspection of records.

Copying costs for documents are \$0.25 per page; charges for duplicating other media such as video tape, microfilm, or computer records will be determined. The cost for certification is \$1.00 per document. Copies of records will be provided only after payment of the appropriate copying charge.

The FOIA Officer will respond within seven (7) working days from receipt of this request by providing access, denying the request, or issuing an extension of an additional seven (7) working days.

**UNDER PROVISIONS OF THE FREEDOM OF INFORMATION ACT, SOME UNIVERSITY
RECORDS MAY BE EXEMPT FROM INSPECTION OR COPYING.**

Office Use Only:

Date and time request received: _____ Party acknowledging receipt: _____