

PURDUE UNIVERSITY FORT WAYNE

REQUEST FOR PUBLIC RECORD

A. Request for Public Record:

1. Requesting Person: _____

Address: _____

Number and Street

City

State

Zip

Telephone: (_____) _____ Email: _____

Area Code

2. Public Record Requested (please identify in detail or attach separate sheet)

3. Date and Time of Request: _____

Signature of Requesting Person

For Office Use Only

4. Date Request Received: _____ Received By: _____

5. Initial Response Action Sent: _____ Signature: _____

B. Purdue University Fort Wayne Action on Above Request:

_____ 1. Grant in full.

_____ 2. No Responsive Documents

_____ 3. PFW does not maintain the requested documents

_____ 3. Denied in full.

Reason for Denial: _____

_____ 4. Granted in part; denied in part.

Reason for Partial Denial: _____

Date

Signature of Public Record Officer or Designee