



Troy School District No.287

103 Trojan Drive PO Box 280

Troy, ID 83871

Phone: 208-835-3791 Fax: 208-835-4250

District Record Request Form

Request for Public Records

I request: to examine to copy to receive an electronic copy of the
following records (please be as specific as possible):

Date Records Requested Were Created:

Beginning: _____

Ending: _____

Name (Please Print)

Mailing Address:

Date of Request

Daytime Phone Number



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District Record Request Form (continued)

Received By: _____

Date Received: _____

Public Agency _____

_____ Initial if Applicable: More than three working days are needed to locate or retrieve the requested records. A response shall be provided within ten working days of the request.

Payment received for _____ copies _____

Amount Received: _____

Payment received for _____ labor _____

Amount Received: _____

Receipt Number