# PUBLIC RECORD REVIEW DUPLICATION REQUEST

## Cumberland Valley School District

### Please print legibly

**Date of Request:**

**Requester's Name:**

**Requester's Address:**

**Requester's Telephone:**

I request [ ] review [ ] duplication (check applicable boxes) of the following records. **Important:** You must identify or describe the records with sufficient specificity to enable the school district to determine which records are being requested. Use additional sheets if necessary.

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I certify that I am a legal resident of the United States:

______________________________
Signature of Requester

This request may be submitted in person, by mail or by facsimile to:

Ms. Tracy Panzer, Communications Specialist
Cumberland Valley School District
6746 Carlisle Pike
Mechanicsburg, PA 17050

**To be completed by school district:**

<table>
<thead>
<tr>
<th>Request No.</th>
<th>Date Received:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Five (5) Response Due:</td>
<td>______________________</td>
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</table>

**Action Taken:**

<table>
<thead>
<tr>
<th>Action Taken</th>
<th>Date of Approval</th>
<th>Date notice mailed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denied</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional Review</td>
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