

Lackawanna Trail School District

P.O. Box 85 • Factoryville, Pennsylvania 18419
Phone (570) 945-5184 • FAX (570) 945-3154

Matthew Rakauskas
Superintendent

David Homish
Business Manager

Right-to-Know Request Form

Date requested _____

Request submitted by: Email US Mail Fax In person

Name of Requester _____

Street Address: _____

City/State/County (Required): _____

Telephone: (optional) _____

Access to records requested: (provide as much specific detail as possible so the District can identify the information)

Please mark as appropriate. If not completed, the District will assume request for inspection.

1. Do you want to inspect the records? Yes or No (No fee for access, if granted)
2. Do you want the record electronically, if available in the format? Yes or No (No fee for access, if granted)
3. Do you want paper copies? Yes or No (If yes, there may be a copy fee)
4. Do you want certified copies of records? Yes or No (If yes, there will be a fee for certification)
5. Do you want paper copies or certified copies mailed to you? Yes or No (If yes, there will be a fee for postage)

Right-to-Know Officer:

To be completed by the District:

Date received by the District: _____

Five Business Day Response Due: _____

The District will only respond to written requests. If the requester wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702)

LACKAWANNA TRAIL SCHOOL DISTRICT is an equal opportunity educational institution and will not discriminate on the basis of race, color, national origin, sex and handicap in its activities, programs, or employment practices as required by Title VI, Title IX and Section 504