

**Bloomfield Central School**

45 Maple Avenue, Suite A, Bloomfield, NY 14469  
Phone (585) 657-6121, 4004 Fax (585) 657-6060

**APPLICATION FOR PUBLIC ACCESS TO RECORDS**

TO: DEBRA ROBINSON, RECORDS ACCESS OFFICER

I hereby apply to: (Check all that apply) \_\_\_\_\_ inspect and/or \_\_\_\_\_ obtain a copy (\$.25 one copied side if not available electronically) of the following record:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print name

Representing: \_\_\_\_\_

Mailing Address (Please Print)

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**FOR AGENCY USE ONLY**

Date Received \_\_\_\_\_

APPROVED \_\_\_\_\_ Materials will be forwarded when ready. A charge of \$.25 per page for copies will be charged if record is not electronically available.

DENIED \_\_\_\_\_

Record of which this agency is Legal Custodian cannot be found. \_\_\_\_\_

Record is not maintained by this agency. \_\_\_\_\_

Other (specify) \_\_\_\_\_

Signed: \_\_\_\_\_

Date \_\_\_\_\_

Debra Robinson, Records Access Officer

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NOTICE: YOU HAVE A RIGHT TO APPEAL A DENIAL OF THIS APPLICATION TO THE SUPERINTENDENT OF SCHOOLS, MICHAEL J. MIDEY, WHO MUST FULLY EXPLAIN HIS REASONS FOR SUCH DENIAL IN WRITING SEVEN (7) DAYS OF RECEIPT OF AN APPEAL.

I hereby Appeal:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date