

PUBLIC RECORDS REQUEST FORM

Rowan University
201 Mullica Hill Road
Glassboro, New Jersey 08028

See Instructions on Reverse Side

Section I - Requestor Information: (See Note Below) - Please PRINT or TYPE all information

First Middle Last

Name: _____

Company: _____ Telephone: () -

Address: _____ E-mail: _____

State: _____ City: _____ Zip: _____

Under penalty of N.J.S.A. 2C:28-3, have you been convicted of any indictable offense under the Laws of any state or the United States? [] Yes [] No
Are you a citizen of the United States? [] Yes [] No

Preferred Delivery: (Choose One)
[] Pick-Up [] US Mail [] Electronic [] Other
If other specify: _____

Signature: _____ Date: _____

Section II - Records Request Information: Give a description of the records you are requesting. Add additional pages if needed.

Multiple horizontal lines for providing a description of records requested.

Section III - Payment Information - [] Cash [] Check [] Change [] Money Order

Note: To request University records under the Open Public Records Act (OPRA), sections I, II, and III of this form must be completed and delivered by an appropriate means to Richard Hale, Vice President for Administration and Finance, the Custodian of Records in Linden Hall.

Section IV - FOR ADMINISTRATIVE PURPOSE ONLY

Tracking#: _____ Total # of pages: _____

Disposition Detail - [] Filled [] Denied [] Partially Filled (If request is denied, list the reason below.)

Multiple horizontal lines for providing disposition details.

Charges
Number of Pages:
1st - 10th pages: _____ x \$0.75 per page
11th - 20th pages: _____ x \$0.50 per page
All pages over 20: _____ x \$0.25 per page
Grand Total: _____
Special Delivery Fee: _____ Fee: _____
Special Service Fee: _____ Fee: _____
Due to: _____ Due to: _____

Custodian Signature: _____ Date: _____