



# BROWNSBURG COMMUNITY SCHOOL CORPORATION

## F.L. O'NEAL ADMINISTRATION CENTER

310 Stadium Drive  
Brownsburg, IN 46112  
(317) 852-5726 Fax (317) 852-1015  
www.brownsburg.k12.in.us

### REQUEST FOR PUBLIC RECORD

Indiana's Access to Public Records Act ("APRA"), Indiana Code §5-14-3-1 et seq., provides the framework for requesting information from a governmental agency. Moreover, APRA states that, "it is the public policy of the state that all persons are entitled to full and complete information regarding the affairs of government and the official acts of those who represent them as public officials and employees." (Indiana Code §5-14-3-1) However, some public records may not be disclosed under various circumstances, or may be disclosed at the discretion of the agency.

**Pursuant to Indiana Code § 5-14-3-1, as amended, the Brownsburg Community School Corporation requires all records requests to be made in writing. Please submit your request by either email or mail to:**

**EMAIL:** [publicrecords@brownsburg.k12.in.us](mailto:publicrecords@brownsburg.k12.in.us)  
**MAIL:** Brownsburg Community School Corporation  
Public Records Request  
310 Stadium Drive  
Brownsburg, IN 46112

I \_\_\_\_\_, (print) am making a request for the following public record(s): (Please be specific as to the title and date of record requested)

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I want to **view** the record \_\_\_\_\_ I want a **copy** of the record \_\_\_\_\_

Your request, if not made in person, will be acknowledged within 1 business day. Documents requested will be provided in a reasonable time for the following fee (fee must be paid at time of delivery):

- Black & White Copies – \$0.10 per page
- Color Copies - \$0.25 per page

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Signature

#### BCSC MAY PROVIDE ME WITH ITS RESPONSE:

- By Telephone at: \_\_\_\_\_
- By Mail at: \_\_\_\_\_
- By Email transmission: \_\_\_\_\_
- By Fax at: \_\_\_\_\_

#### FOR OFFICE USE ONLY:

Request Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt Acknowledged by: \_\_\_\_\_ Date: \_\_\_\_\_

Request Filled/Delivered by: \_\_\_\_\_ Date: \_\_\_\_\_