Glen Rose Independent School District

Texas Public Information Act Request Form

Date: _____

Name: _____

Address: _____ **City:**_____ **Zip** _____

Phone: _____ **Fax:** _____ **Email:** _____

I request the following document(s) from Glen Rose ISD under the Texas Public Information Act, Texas Government Code Chapter 552. (Please be very specific in your request)

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Please provide the information via: (check one)

Call me when ready for ☐ **Pick up** ☐ **Mail** ☐ **Fax** ☐ **E-mail (if possible)**

_____
Signature