



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)

Please provide the information via: (check one)

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

Signature