



Request Number: \_\_\_\_\_

**Public Records Office**  
 Yakima Valley College  
 PO Box 22520 · Yakima, WA 98907-2520  
 509.574.4635 · Fax 509.574.4675  
 Email: [publicrecords@yvcc.edu](mailto:publicrecords@yvcc.edu)

**REQUEST FOR PUBLIC RECORDS**

1. IDENTIFICATION		
Name of Requester	Date of Request	Time of Request
Representing (if applicable)	Email address	Telephone
Street Address	City	State/Zip Code

II. NATURE OF REQUEST
<p>Please be as specific as possible in defining the records you wish to see. If you do not know the specific name of the records you desire, indicate by a general written description of the type and content of information you wish to locate. Where possible, indicate limiting dates, topic, and person(s) referenced. Attach additional sheets if necessary.</p> <p><input type="checkbox"/> I choose to inspect the records at no charge before selecting copies.</p> <p><input type="checkbox"/> I choose to request reproduction of the records.</p> <p>I hereby certify that if a list of individuals is provided to me by Yakima Valley College, it will neither be used to promote the election of an official or to promote or oppose a ballot proposition as prohibited by RCW 42.17.130 nor for commercial purposes or to give or provide access to materials to others for commercial purposes as prohibited by RCW 42.56.070 (9). I further understand that I will be charged 15 cents per page for all standard and legal sized copies reproduced.</p> <p>Requester's signature: _____ Date: _____</p>

**OFFICE USE ONLY**

III. DISPOSITION OF REQUEST		
Request referred to:	<u>Name/Department</u>	<u>Date Sent</u>
<input type="checkbox"/> Office in Custody of Record	1. _____	_____
	2. _____	_____
	3. _____	_____
<input type="checkbox"/> <b>REQUEST APPROVED</b>	Date: _____	By: _____
<p><b>Charge:</b> Requester must pay in advance by check made payable to Yakima Valley Community College. Remit to Cashier, Deccio Higher Education Center, Yakima Campus. Upon receipt of check, requested materials will be released from the Public Records Office.</p> <p><input type="checkbox"/> No charge; the request was less than 20 pages.</p> <p><input type="checkbox"/> _____ Copies @ 15¢ per page for a total of \$_____.</p>		
<input type="radio"/> <b>REQUEST DENIED</b>	Date: _____	By: _____
Reasons for denial:		

If you need this publication in an alternate format, please call 509.574.4635 or email [publicrecords@yvcc.edu](mailto:publicrecords@yvcc.edu) . Persons with hearing loss can call 509.574.4677.