

According to the Georgia Open Records Act (OCGA §50-18-70 to §50-18-77), all public records are available for inspection and copying unless they are specifically exempted from disclosure under the law. If a government agency or custodian of public records withholds a public document from production under an Open Records Request, they will cite the provision of Georgia law that exempts the record from being produced.

All open records requests to inspect or copy records must be made in writing using the District's Open Records Request Form to the Superintendent's secretary. Open records requests must be made in person so school district staff can verify the individual making the request. The school district will provide information relating to the request, as permissible and applicable by law, within three (3) business days after it has been received by the Superintendent. If production of the information is not possible within that timeframe, the Superintendent (or his designee) will issue correspondence with an explanation.

In accordance with the Georgia Open Records Act, Jeff Davis County Schools will charge \$.10 per copy and the hourly rate of the lowest paid employee capable of retrieving the records requested. There will be no charge for the first fifteen minutes of labor required to fulfill the request.

The Jeff Davis County School System complies with requests for records, as required by law, under the provisions of the Georgia Open Records Act.

**JEFF DAVIS COUNTY SCHOOL SYSTEM  
REQUEST TO INSPECT PUBLIC RECORDS**

Printed Name of Person requesting access to public records or documents \_\_\_\_\_

List below the specific public records or documents which are requested, and whether the request is for review (R) or for photocopies (C). Attach additional sheet(s) if more space is needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Check here if you want copies made. Please advise the person assisting you which documents you want copied.

Signature of Person making request \_\_\_\_\_

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**(For Board of Education Use Only)**

Date this request is received by the Jeff Davis County Board of Education \_\_\_\_\_

Request reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Request Approved ( )      Denied ( )      Some of the items are open records, others are closed ( )

Date & Time records reviewed: \_\_\_\_\_

Name of person overseeing review or photocopying: \_\_\_\_\_

Number of pages copied _____	x.10 = _____
Search/Retrieval/Administrative Cost _____	= _____
Miscellaneous _____	= _____
<b>Total Cost</b> _____	= _____
<i>Amount received from Requestor:</i> _____	= _____
<i>Received by:</i> _____	<i>Date Received:</i> _____

If all or any portion of the request is denied, state below which documents were denied and why (e.g. medical records, evaluations, etc.). Keep a duplicate copy of any document where a portion of the document must be redacted or blackened-out.