

RIGHT-TO-KNOW LAW

You have the right to request access to the Erie County Technical School public records. Request for public records are to be made to the Open Records Officer. Requests may be submitted in person, by mail, by email, or by facsimile. Requests may be oral or written, and may be made using the Erie County Technical School Public Records Request Form. The form is available from the Open-Records Officer, in the main office, or online at http://www.ects.org/. Additionally, requests may be made using the Pennsylvania Office of Open Records Uniform Request Form, available at www.openrecords.state.pa.us.

Regulations, policies and procedures of the Erie County Technical School are available from the Open-Records Officer, in the main office or online at http://www.ects.org/.

The Erie County Technical School Open Records Officer may be contacted at:

Name:	Terri L. Birchard
Address:	8500 Oliver Road Erie, PA 16509
Phone:	(814) 464-8600
Fax Number:	(814) 464-8625
Email:	openrecords@ects.org

The Pennsylvania Office of Open Records may be contacted at:

Address:	Office of Open Records Commonwealth Keystone Building 333 Market Street, 16 th Floor Harrisburg, PA 17120-0225
Phone:	(717) 346-9903
Email:	openrecords@state.pa.us



Public Record Request Form

Requester Name:

Requester Mailing Address:

Phone:

(__)

Email:

Please identify or describe the records sought:

(Please attach an additional sheet of paper if necessary)

Please note the format you would like the records to be in, such as in paper or electronic format. If you desire access in an electronic format, please list which format.

(*Records will be provided in the format requested, if it exists in that format; otherwise it will be provided in the format in which it exists.*)

I am requesting that:

- □ the identified records be mailed to me at the address provide. I understand certain duplication and postage fees apply.
- □ the records be made available for inspection at the offices of Erie County Technical School during regular business hours.
- \Box the records be forwarded to me electronically.
- □ certified copies of the records be made available to me. I understand that fees for providing certification of records apply.

Date Request Submitted: _____

Signature of Requester: _____

For Open-Records Officer Use Only

Date of Receipt: ______5 Day Response Date: _____