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INDEPENDENT SCHOOL DISTRICT

P.O. Box 10 San Isidro, Texas 78588 956-481-3110 Fax 956-481-3930

Requestor's Information

Name (Person or Business): _____

Address: _____

City

State

Zip Code

Telephone: _____ Fax: _____ Email: _____

Requested Information (Please be as specific as possible)

Social Security Numbers WILL NOT be provided

Requested Media

DVD Hard Copy Mailed Hard Copy Picked Up in Person Email CD Other: _____

Requestor's Signature

Date

Texas Administrative Code Chapter 552 (Public Information Requests): Under the Public Information Act, the district will fulfill your request within a reasonable amount of time as per Subsection 552.221. TAC, chapter 552, Subchapter F (Changes of Providing Copies of Public Information) provides guidelines for any changes associated with providing copies of Public Information. There is a 10-cent per page charge for all copies. If your request also requires one or more hours of labor to provide the information as defined in the above, you will receive a written explanation of charges and your options. Section 552.275 authorized a governmental body to establish a 36 hour limit in a 12 month period on the amount of time that personnel are required to spend producing public information without recovering the cost attributable to the personnel time related to that requestor. A requestor will be required to compensate the District for the cost incurred in satisfying subsequent requests once the time limit has been reached.

Please submit request to:

San Isidro Independent School District
Attn: Superintendent
5175 FM 1017, San Isidro, TX 78588
Phone: 956.481.3110
Office Hours: Monday - Friday 7:30 a.m. - 4:30 p.m.
Email: informationrequest@sanisidroisd.org

This request follows School Board Policy GBAA (LEGAL)

FOR SIISD USE ONLY

] Date Due to Requestor: _____

Superintendent

Date

Date Sent: _____