



WFISD

Department of Support Services

1104 Broad Street * P O Box 97533 * Wichita Falls TX 76307-7533

PHONE (940) 235-1017 • FAX (940) 720-3201

open_records@wfisd.net

REQUEST FOR STAFF OR STUDENT RECORDS

Date: _____ Full name reflected on record: _____ DOB: _____

Requestor's name/relation: _____ Telephone: _____

Full address: _____

If **student** records, dates of attendance: _____

If **staff** records, dates of employment: _____

Information Requested – Please be specific: _____

PLEASE CHOOSE: **I will pick up records** **Please mail records**

Requestor's Signature: _____

| | |
|--------------------------|--------------------|
| For WFISD Use: | |
| Date Supplied: _____ | Supplied by: _____ |
| Date Denied: _____ | Denied by: _____ |
| Reason for denial: _____ | |
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