



Office Use Only  
Date Requested:  
Date Completed:

## Public Information/Educational Records Request

In order to better serve you and make sure that I give you the exact information you want, please put all requests for public information in writing and fax it to (972) 544-2784. Please be as precise as possible and give all of the following information:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Last Grade Attended \_\_\_\_\_ Last Year Attended \_\_\_\_\_

Information Requested \_\_\_\_\_

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

Signature \_\_\_\_\_

Thank you

T.J. Knight  
Director of Assessment & Operations  
Ferris ISD Records Management Officer