



# MPIA Request Form

If the information you seek is not available online or via our publications, complete and submit this form to Public Information Request, Wor-Wic Community College via postal mail at 32000 Campus Dr., Salisbury, MD 21804

**Applicant's Name:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Email address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number: \_\_\_\_\_

Billing address (if different) for associated costs: \_\_\_\_\_

I hereby request information under the Maryland Public Information Act. I am seeking the following information – **(be as specific as possible, it will help us respond to your request more efficiently):**

1. Identify or describe the data, information, document(s), record(s) or report(s) being requested:  
\_\_\_\_\_  
\_\_\_\_\_
2. List the topics or subject matters contained in the documents/records requested:  
\_\_\_\_\_  
\_\_\_\_\_
3. Include where possible names, dates, times, events or places, etc. might be found:  
\_\_\_\_\_  
\_\_\_\_\_
4. Specify a timeframe for the search (how far back do you want the college to search?).  
\_\_\_\_\_
5. If known, include any file designation or particular departments you want to search for records.  
\_\_\_\_\_  
\_\_\_\_\_

If you need additional space, please attach a second sheet.

**Applicant's Certification:**

*By submitting this request, I certify that I have determined the information sought is not available via publications, online or other sources readily available to the public. I understand that the information I request may not be subject to release and that the college is not required to create a record, data, information, document, report, etc. in order to satisfy a request. I understand that the college has 10 working days to respond to my request and 30 days to comply with information that can be provided. Information will be provided (or made available) by the most efficient means.*

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**OFFICE USE ONLY:**

[ ] DATE RECEIVED by public information officer: \_\_\_\_/\_\_\_\_/\_\_\_\_ Initials: \_\_\_\_\_

[ ] Verification: This information is not readily available to the public via existing publication, web, etc.

[ ] Verification: Wor-Wic possesses this information.

[ ] Information CAN be provided (ie., no valid exceptions apply per the MPIA).

- Custodian (official/department): \_\_\_\_\_
- \_\_\_\_/\_\_\_\_/\_\_\_\_ Request forwarded to custodian.
- \_\_\_\_/\_\_\_\_/\_\_\_\_ Custodian's compliance deadline

[ ] Information CANNOT be provided pursuant to the following valid exception(s):

\_\_\_\_\_

» MPIA officer to *specify* what information cannot be provided to the requestor and why within 10 days.

[ ] The approved information has been provided by the custodian.

- \_\_\_\_/\_\_\_\_/\_\_\_\_ Request satisfied & information provided or made available.
- \$ \_\_\_\_\_ Cost to be paid by the requestor (within 30 days):

Exceptions: Applicant has requested indigence or public interest waiver with affidavit.

- ( ) Duplication (per page) \_\_\_\_\_ ( ) Research (time in excess of two hours)
- ( ) Assembly (time, materials) \_\_\_\_\_ ( ) Postage (USPS rates ) \_\_\_\_\_
- ( ) Consultation (time, fee) \_\_\_\_\_ ( ) Other (Specify) \_\_\_\_\_

A copy of this form may be provided to requestor upon request.

\*Custodian: Be sure to keep a copy of this form for your records and to send a copy of this form to the MPIA officer.

[mcr@worwic.edu](mailto:mcr@worwic.edu) 32000 Campus Drive / Salisbury, Maryland 21804