

TITLE: ACCESS TO AND EXAMINATION OF PUBLIC RECORDS

PURPOSE

Citizens are entitled to make application to examine and/or copy public records pursuant to the West Virginia Freedom of Information Act. Public records, which include any written information related to the conduct of the Gilmer County Schools public business.

RESPONSIBILITY

All materials should be requested through the Superintendent of Schools. Writings include any books, papers, maps, photographs, cards, tapes, recordings or other documentary materials regardless of physical form or characteristics.

Legal Authority: WV School Code §29B-1-1 et seq.

Board Adoption: August 18, 2014

See Administrative Procedures

**GUIDELINES AND PROCEDURES FOR ACCESS TO AND EXAMINATION
OF PUBLIC RECORDS**

- A. Any request to inspect or copy any public records of the Gilmer County Schools is to be made directly to the Superintendent of Schools. The request must be initiated through the completion and submission of the REQUEST FORM FOR ACCESS AND EXAMINATION OF PUBLIC RECORDS otherwise be in writing in substantial conformity with this form.
- B. If the request is made under the West Virginia Freedom of Information Act, the custodial administrator shall, as soon as practicable but within a maximum of five days not including Saturdays, Sundays or legal holidays:
1. Furnish copies of the requested information; or
 2. Advise the person making the request of the time and place at which he or she may inspect and copy the materials; or
 3. Deny the request stating in writing the reasons for such denial.

If access to the requested records is denied, the requestor has the right to institute proceedings for injunctive or declaratory relief in the circuit court of Gilmer County.

- C. It is the responsibility of the custodial administrator to provide a safe and comfortable environment for records to be reviewed.
- D. Administrative/Management Records requested for individual's personal use:

There will be a charge of \$25.00 per hour charge for request that require more than 10 minutes. Duplication fees will be charged to all requesters. For either a photocopy or a computer-generated printout of a record (no more than one copy of which need be supplied), the fee will be forty cents (\$.40) per page. For electronic forms of duplication, other than a computer-generated printout, Gilmer County Schools will charge the direct cost of that duplication. Such direct costs will include the costs of the requested electronic medium on which the copy is to be made and the actual operator time and computer resource usage required to produce the copy. The cost of electronic duplication that involves the duplication of files on disc or thumb drive shall be forty cents (\$.40) per document in addition to the cost of electronic medium referenced above. The estimated direct cost of duplication using other forms of electronic media will be provided in advance of duplication.

- E. When requested, one free copy of an employee personnel file will be provided to the employee once a year.

- F. All fees collected shall be appropriately accounted for under procedures established by the Chief School Business Official/Treasurer. A receipt shall be given to the requestor on payment of fees.
- G. The requestor of public records must verify receiving of all materials on the back of the REQUEST FORM.

Duplication – means the making of a copy of a record, or of the information contained in it, necessary to respond to a FOIA request or other request for duplicated records. Copies can take the form of paper, microform, audiovisual materials, or electronic records (for example, magnetic tape, disk, or compact disk), among others. Gilmer County Schools will honor a request's specified preference of form or format of the disclosure if the record is readily reproducible with reasonable efforts in the requested form or format.

GILMER COUNTY SCHOOLS POLICY 1061

REQUEST FORM FOR ACCESS AND EXAMINATION OF PUBLIC RECORDS

REQUESTOR'S NAME _____ DATE _____

ADDRESS _____

PHONES: Home _____ Work _____ Other _____

INFORMATION BEING REQUESTED: (Be Specific)

Dated Needed _____

Signature

DISPOSITION BY CUSTODIAN ADMINISTRATOR

Custodial Administrator Receiving Request: _____

Date Received: _____

APPROVED _____ DISAPPROVED _____ DATE _____

Reason(s) for disapproval: _____

Signature of Custodial Administrator