

**NORTHERN LEHIGH SCHOOL DISTRICT**  
**1201 Shadow Oaks Lane**  
**Slatington, PA 18080**

**PUBLIC RECORD REQUEST FORM**

According to Northern Lehigh School District Policy 801, I am requesting the following public records as clearly indicated in the box below:

Name of Requestor: \_\_\_\_\_

Address of Requestor: \_\_\_\_\_

\_\_\_\_\_

Date of Request: \_\_\_\_\_

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As per Policy 801, the following fee schedule will be applied:

Paper copies.....\$0.25 per page, per side

Disk.....\$1.00 per disk

“True and Correct Certification” .....\$2.00 per certified document

The School District will require prepayment if the total fees are estimated to exceed \$100.00.  
All charges shall be paid at the time the copies are delivered to the requestor.