



DELTA STATE UNIVERSITY REQUEST FOR PUBLIC RECORDS

Requestor's Name: _____

Representing: _____

Street/Mailing Address: _____

City, State, Zip: _____

Telephone: _____ Email: _____

Date of Request: _____

Documents Requested: _____

Type of Review Requested:

Personally Inspect _____

Copy of Materials _____

Additional Instructions: _____

Requestor's Signature: _____

Please submit this request via:

U.S. Mail:

Delta State University
Office of Human Resources
Kent Wyatt Hall 218a
1003 West Sunflower Road
Cleveland, Mississippi 39733

Email:

tmharris@deltastate.edu

Note: The actual costs of gathering and reproducing the requested records will be the responsibility of the requesting party.

Please direct any questions to Delta State University's Office of Human Resources at (662) 846-4035.