



Written Request to Examine Records

Return Methods: Physical Address: 625 E. Humbolt St, Pocatello ID 83209 Or Email: pubsafe@isu.edu

Your name (please print)

Telephone number

Address

City

State

Zip

The report number I am requesting is: _____

If report number is unknown, briefly describe when and where the incident occurred and who was involved:

How do you want your report returned?

- ☐ Pick up from the Public Safety building at 625 E. Humbolt St.
☐ Mailed to the following address: _____
☐ Emailed to: _____

I am listed in this report as:

- | | |
|----------------------------------|--------------------------------|
| <input type="checkbox"/> Victim | <input type="checkbox"/> Other |
| <input type="checkbox"/> Witness | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Suspect | |

I am the parent/guardian of a juvenile listed in this report as:

- | | |
|----------------------------------|--------------------------------|
| <input type="checkbox"/> Victim | <input type="checkbox"/> Other |
| <input type="checkbox"/> Witness | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Suspect | |

Would you like to also receive any available camera footage?

- ☐ Yes
☐ No

I understand that the information received cannot be used as a mailing list or a telephone number list. I also understand that the use of reports, documents and media obtained from ISU Public Safety in a manner that is illegal, slanderous, or otherwise inappropriate may result in criminal prosecution and/or civil litigation.

In accordance with State Records and Federal FERPA laws some information may be redacted from the report in order to maintain compliance with these laws.

Signature: _____

Date: _____