



## **Written Request to Examine Records**

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

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Your name (please print)

Telephone number

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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:

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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: \_\_\_\_\_