

**Wolfe City Independent School District**  
**Administration Office**  
505 W. Hanna Street  
Wolfe City, TX 75496

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**GENERAL OPEN RECORDS REQUEST FORM**

1. Applicant information – All sections are to be completed by applicant.

Applicant name: \_\_\_\_\_

Firm name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No: \_\_\_\_\_

2. Records Requested – Please be specific and describe the records being requested. Attach additional pages if required.

Applicant Signature: \_\_\_\_\_

Items expressly confidential under law will not be disclosed. Refer to the Public Information Handbook, Part Two, Exceptions to Disclosure, at [www.oag.state.tx.us](http://www.oag.state.tx.us) for more information.

SUBMIT OPEN RECORDS REQUESTS BY ANY OF THE FOLLOWING:

VIA EMAIL: [cuppj@wcisd.net](mailto:cuppj@wcisd.net)

MAIL: Julie Cupp  
Wolfe City ISD  
ADMINISTRATION OFFICE  
505 W. Hanna Street  
Wolfe City, TX 75496