

ILLINOIS CENTRAL COLLEGE
FREEDOM OF INFORMATION ACT
REQUEST FOR INFORMATION

Name of Person Filing Request: _____

Address: _____

City _____ **State** _____ **Zip Code** _____

Telephone: _____ **(Daytime)**

Email: _____

Description of Information Requested: *

* Private information is exempt from disclosure under FOIA. FOIA defines "private information" as "unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal financial information, passwords or other access codes, medical records, home or personal telephone numbers, and personal e-mail addresses." Under FOIA, "private information also includes home addresses and personal license plate numbers, except as otherwise provided by law or when compiled without possibility of attribution to any person."

Fees may be charged to reimburse the actual cost for reproducing and certifying requested information as allow for the Freedom of Information Act. Fees will be limited to the cost of "reproduction and certification."

Is this request for a commercial purpose? Yes No

Indicate if you wish to inspect the above described records or desire a copy of them:

Inspect Copy Both

Signature of Person Requesting Information

Date

RETURN FORM TO: Bruce Budde, ICC, One College Drive, East Peoria, IL 61635