

# RECORDS REQUEST

Tuscarawas County Job & Family Services

<b>PERSON REQUESTING INFORMATION:</b>		
NAME	ADDRESS	PHONE/EMAIL
DATE REQUEST OF INFORMATION MADE	DATE INFORMATION NEEDED: (IF COURT, ETC.)	
<b>IDENTIFICATION OF THE PERSON YOU ARE REQUESTING INFORMATION ABOUT:</b>		
NAME (married and maiden)	SSN	DATE OF BIRTH
FAMILY CASE FILE (EX: PARENT'S NAMES)	TIMEFRAME OF OCCURRENCE	YOUR RELATIONSHIP TO THIS PERSON
<p>Please provide a detailed request.</p> <p>What specific information do you need regarding this child? Why do you need this information? What is the intended use? Who will have access to this information other than you?</p>		