



UNIVERSITY POLICE
 SONOMA STATE UNIVERSITY
 1801 E COTATI AVENUE
 ROHNERT PARK, CA 94928
 PHONE: (707) 664-4444
 FAX: (707) 664-2248



APPLICATION FOR RECORDS/REPORT RELEASE

DISSEMINATION OF POLICE INFORMATION TO UNAUTHORIZED PERSONS IS PROHIBITED AND PUNISHABLE AS A CRIME UNDER STATE LAW.

	← NAME OF REQUESTING PARTY
	← MAILING ADDRESS
	← CITY, STATE, ZIP
	← TELEPHONE

Please complete all information below as instructed. There is a non-refundable cost of .20 per page. Personal checks or money orders only and must be payable to Sonoma State University.

Pursuant to the California Records Act, 6253(a), requests will be processed within 10 business days. We will notify requestors by phone if requests require additional processing time. Failure to accurately complete the required fields may lead to denial of the request. You will be asked to provide proof of identity when picking up your report.

Date of Request: ___/___/___

Request for:

- Copy of Police Report Copy of Traffic Report Copy of Injury Report

Other: _____

Case Number: _____ **Date of Incident:** _____

Type of Incident: _____

Relationship to the Incident:

- Victim Insurance Carrier
 Involved Authorized Representative of Victim
 Arrested/Suspect Parent/Guardian of Juvenile

Other: _____

Reason for Request: _____

I declare, under the penalty of perjury, that I am the party of interest as checked above.

 SIGNED DATE

DEPARTMENT USE ONLY

DATE RECEIVED:	DATE PROCESSED: _____	DATE OF RELEASE: _____
	<input type="checkbox"/> REQUEST APPROVED	RELEASED BY: _____
	<input type="checkbox"/> REQUEST DENIED	ID VERIFIED: <input type="checkbox"/>
	REASON FOR DENIAL: _____	