

 **College of DuPage**  
**Freedom of Information Act (FOIA)**  
**Request for Records**

Request Date: \_\_\_\_\_ Request submitted by: Email  U.S. Mail  Fax

**Required:** Is this request for a Commercial Purpose? Yes  No

Name of Requester: \_\_\_\_\_

Organization/Company: \_\_\_\_\_

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

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

Daytime Telephone: \_\_\_\_\_

Email (optional): \_\_\_\_\_

**Records Requested** (*Please be specific – check here if additional page(s) attached* )

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Signature of Requester: \_\_\_\_\_

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**SUBMIT REQUEST**

*Please note: During the pandemic while the College campus is closed to the public and staff is working remotely, submission of FOIA requests via email is strongly encouraged, but not required.*

**Email:** hollowedl@cod.edu

**U.S. Mail:** College of DuPage  
425 Fawell Blvd.  
SRC 3110  
Glen Ellyn, IL 60137

**Fax:** (630)942-3925

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**FOR OFFICE USE ONLY**

Request Received: Date \_\_\_\_\_ Time \_\_\_\_\_ a.m. / p.m.

Received by (COD employee name and signature): \_\_\_\_\_