

COLORADO RECORDS ACT (CORA) FAQ & REQUEST FORM *



1. File requests shall be submitted in writing by letter, fax, or email to:

President and CEO
Denver Preschool Program
305 Park Avenue West, Suite B
Denver, CO 80205
720-287-5055

2. Requests should include the following information (or use attached form):

Date of request
Your name
Company name (if applicable)
Your address
Your telephone number
Your signature
A detailed list or description of the specific information you are seeking

3. Upon receipt of the request, a computer search is done and relevant public documents are compiled. The Colorado Open Records Act allows the Denver Preschool Program up to three working days to comply with your request. If extenuating circumstances exist, DPP has up to seven working days to fill your request. You will be notified in writing when your request is complete. Any information that is confidential by law or exempt from the Colorado Open Records Act will not be provided.
4. Information will be provided via hard copy, fax, or electronic e-mail depending in what medium the requested public information was created. DPP reserves the right to charge a reasonable fee for photocopies or other reproduction costs as necessary. DPP will inform requestor in advance if there are any applicable charges for the requested information.

If you do not want to receive copies but wish to view the information in person, please state that in your written request. Once the documentation has been gathered, you will be asked to set up an appointment to come to DPP's offices and view the documents.

5. Please note that under Colorado law, 18-8-114 C.R.S. (1989), it is a Class 1 misdemeanor for a person to knowingly make a false entry or alter any public record or to destroy, mutilate, conceal, remove, or impair the availability of any public record

****This document has been compiled as a quick reference for Denver Preschool Program stakeholders. Please view the entire Colorado Open Records Act (C.R.S. 24-72-201 to 24-72-309) for more details.***

REQUEST FOR INFORMATION FORM

Business Hours: 9:00 a.m. to 5:00 p.m.
Monday through Friday
720.287.5055

**FUNDING
QUALITY
PRESCHOOL
FOR DENVER**

Date Requested: _____

Requestor Name: _____

Company Name: _____

Address: _____

Telephone Number: _____

Fax Number: _____

Signature of Requestor: _____

Information Requested (*please be as specific as possible*):

FOR DPP USE ONLY (*please initial each line*)

Date Received: _____

Date Request Processed: _____

Date Request Completed (or viewed): _____

Applicable Reproduction Costs (if any): _____

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PRESCHOOL
FOR DENVER**