Public Access Option Form

Texas Government Code Section 552.024

This form should be completed and signed by the employees no later than the 14th day after the date of employment, the public official is elected or appointed, or a former employee or official ends employment or service.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

The Public Information Act allows employees, public officials and former employees and officials to elect whether to keep certain information about them confidential. Unless you choose to keep it confidential, the following information about you may be subject to public release if requested under the Texas Public Information Act.

Please indicate whether you wish to allow public release of the following information.

 PUBLIC ACCESS?

 (NO) (YES)

|  |  |  |
| --- | --- | --- |
| Home Address |  |  |
| Home Telephone Number |  |  |
| Social Security Number |  |  |
| Emergency Contact Information |  |  |
| Information that reveals whether you have family members |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

This form will be retained in the Central Office as a permanent record. The information may be changed at any time upon request by the individual named above.