



Freedom of Information Act Notice

NDSEC is a cooperative agreement of nine public school districts, seven elementary and two high school districts within DuPage County, that serve a total population in excess of 15,000 students. NDSEC provides a complete range of services to students with special needs between the ages of 3 and 22 years.

NDSEC assists its nine member districts with the provision of special education instructional and related services. These districts include Bensenville District #2, Addison District #4, Wood Dale District #7, Itasca District #10, Medinah District #11, Roselle District #12, Bloomingdale District #13, Fenton District #100 and Lake Park District #108. NDSEC works in collaboration with its member districts to administer programs for students with autism, multiple disabilities, emotional disabilities, developmental delays, hearing impairments, visual impairments, other health impairments, learning disabilities and intellectual disabilities. NDSEC also provides related services of psychology, social work, speech, adapted physical education, physical and occupational therapy, and vocational and nursing services to eligible students as well as consultation services to district personnel.

NDSEC is recognized by the Illinois State Board of Education as the legal entity responsible for operating special education programs within its member districts. NDSEC is responsible for: (1) assisting its member districts to ensure compliance with federal and state regulations in programming for students with disabilities; (2) providing technical assistances; and (3) serving as an extension of each district by providing a continuum of services. NDSEC employs approximately 130 staff.

The philosophy of the Cooperative is to serve as a partner with educators, parents, and the community at large, in providing equal educational opportunities to all students regardless of their physical, intellectual, or emotional needs. NDSEC is committed to providing responsive programs and services that will improve the quality of life for students with special needs.

NDSEC FOIA Officers

Todd Putnam	Susan Zikuda
Executive Director	Assistant Director
132 E. Pine Ave.	132 E. Pine Ave.
Roselle, IL 60172	Roselle, IL 60172
630-894-0490	630-894-0490
Fax: 630-894-5960	Fax: 630-894-5960
tputnam@ndsec.org	szikuda@ndsec.org

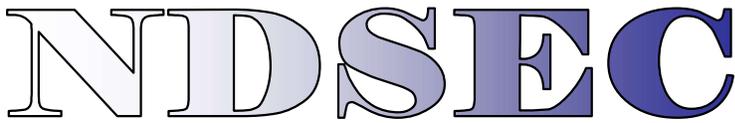
Requests:

Requests for information under the Freedom of Information Act are to be submitted to the FOIA Officer in writing via postal mail, fax, email, or in person at the address listed above. A FOIA request form is available at the address listed above and on the NDSEC website. It may be used by a citizen making such a request; however, the use of the form is not required.

A response to the FOIA request will be provided to the requestor within five (5) business days from the day the office receives the request. The Freedom of Information Officer may extend the time for a response for up to five (5) business days from the original due date. If an extension is needed, the Freedom of Information Officer shall: (1) notify the person making the request of the reason for the extension, and (2) either inform the person of the date on which a response will be made or agree with the person in writing on a compliance period.

Requests received by mail will be considered received on the business day the mail is received by the office. If a request is sent by email during business hours on a business day, it will be considered being received on that day. If the email is sent after business hours or on a non-business day, it will be considered received on the next business day. Saturdays, Sundays and legal holidays are not counted in the computation of the 5-day response period.

No fees shall be charged for the first 50 pages of black and white, letter or legal sized copies requested.



NORTH DUPAGE SPECIAL EDUCATION COOPERATIVE

FREEDOM OF INFORMATION ACT
Written Request for Cooperative Public Records

All requests to inspect and/or to obtain a copy of a Cooperative record must be made in writing. This form is provided for convenience – its use is not required. Please submit all requests to the Cooperative’s Freedom of Information Act (FOIA) Officer. Copying fees, if any, must be paid before copies will be provided. The FOIA Officer can give you an estimate of the copying fees, if any.

Name of individual(s) requesting Cooperative records
Email address
Address
Telephone number
City State Zip Date of request

Please check if this request of records is being made for a commercial purpose. 5 ILCS 140/2(c-10) states: “Commercial purpose means the use of any part of a public record or records, or information derived from public records, in any form for sale, resale, or solicitation or advertisement for sales or services. For purposes of this definition, requests made by news media and non-profit, scientific, or academic organizations shall not be considered to be made for a "commercial purpose" when the principal purpose of the request is (i) to access and disseminate information concerning news and current or passing events, (ii) for articles of opinion or features of interest to the public, or (iii) for the purpose of academic, scientific, or public research or education. 5 ILCS 140/3.1(c) states: “It is a violation of FOIA for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body.”

Please check if a fee waiver or reduction is being requested. 5 ILCS 140/6(c) states: “Documents shall be furnished without charge or at a reduced charge, as determined by the public body, if the person requesting the documents states the specific purpose for the request and indicates that a waiver or reduction of the fee is in the public interest. Waiver or reduction of the fee is in the public interest if the principal purpose of the request is to access and disseminate information regarding the health, safety and welfare or the legal rights of the general public and is not for the principal purpose of personal or commercial benefit.”

Please indicate your reason for requesting a fee waiver: _____

Table with 4 columns: Record description (Please be specific), Electronic Copy, Inspection, Copy. Includes header 'Check if you are requesting:'