



Daniel T. White
District Superintendent

Dan Fullerton
Director
Monroe Regional Information Center

E-MAIL & WEB INVESTIGATION REQUEST FORM

District: _____

Request Date: _____

Requester: _____

Requested Completion Date: _____

e-Mail Request

Full Name: _____

e-Mail Address: _____

☐ Copy Entire Mailbox:

☐ Search Mailbox:

Search Keyword(s): _____

Search Date(s): _____

*Results are **exported** and placed in a secure file for download.*

Web Request (*DISCLAIMER: Web data can only go back 30 days from the day we receive the request.*)

Full Name: _____

Login Name: _____

MAC Address and/or IP Address (*optional*): _____

☐ Search Queries: (i.e. Google, Bing, and Yahoo)

☐ Web Activity:

Date(s): _____

Additional Details: _____

Deliver Results To: _____

Additional Instructions: _____

Director of Technology Signature: _____

Superintendents Signature: (*required for e-Mail Requests only*) _____

(Please send signed form(s) to **Daniel_Fullerton@boces.monroe.edu**.)

For RIC use only Assigned to: _____ Completed: _____