

Freedom of Information Act Request Form

This form is used to request public records, documents, or materials under the South Carolina Freedom of Information Act (FOIA) from the Medical University of South Carolina, the Medical University Hospital Authority and their affiliated entities ("MUSC"), where applicable, and is to be completed by any person and/or entity seeking access for review or copies of public records.

Instructions for completing the Freedom of Information Act Request Form

1. Fill out the top portion of the form, providing as much and as detailed information as possible. We may contact you to obtain additional information necessary to fulfill your request. Please note that insufficient information may result in a delay of the production of the documents requested.
2. Read and sign the Family Privacy Protection Act statement.
3. Deposit and Payment: MUSC may charge an advance deposit based on the estimated cost of searching for the documents requested. **Payment in full must be received prior to the release of the documents requested.** Please see Fee Schedule below.
4. Submit the form through email, by fax, or mail the form to one of the options below:
Email: FOIA@musc.edu
Fax: (843) 792-0570
Mail: FOIA Officer, MUSC, 179 Ashley Avenue, MSC 003, Charleston, SC 29425

Fee Schedule

Search and Retrieval of electronic records and/or hard copy records: MUSC will charge the number of hours required to search and retrieve the records at the lower of \$25.00/hour or the prorated hourly salary of the lowest paid staff member who has the necessary skills and training to perform the search and retrieval of records.

Redaction of non-public information: If any responsive records or portions of responsive records contain information that is not considered public under FOIA and/or any other applicable law, MUSC will charge the number of hours required to redact the records at the lower of \$47.00/hour or the prorated hourly salary of the lowest paid staff member who has the necessary skills and training to redact the requested records.

Copies: \$0.15/page (includes copies made for scanning for electronic transmission)

Postage: Per United States Postal Service

Deposit: MUSC will require a deposit not to exceed 25% of the total reasonably anticipated cost for reproduction of the requested records prior to beginning any search for the requested record(s).

Please note that MUSC is not required to create an electronic version of a public record when one does not exist in order to fulfill a records request, per FOIA at SC Code Ann. § 30-4-30 (A)(2).

Information regarding forms of payment accepted will be provided in MUSC's response and determination regarding the FOIA request.

South Carolina Freedom of Information Act Request Form

Request from (full name): _____

Company/Organization: _____

Address of requester: _____

Requester's contact data (phone and/or email): _____

Identification obtained (copy of driver's license, etc.): Yes or No (circle one, attach copy if Yes)

The purpose of FOIA is to allow citizens of the State of South Carolina or their representatives access to information concerning public business. Although the Medical University of South Carolina supports the right of citizens of the State of South Carolina to learn about the activities of state government, the Medical University of South Carolina and its affiliates may request verification of South Carolina residency and reserve the right to deny requests from those who are not citizens of South Carolina.

Identification obtained (copy of driver's license, etc.): Yes or No (circle one, attach copy if Yes)

Request to: Review records -- or -- Obtain a copy/copies of records (circle one)

Exact request (please include full request or attach copy of original request if needed): _____

Family Privacy Protection Act

The Family Protection Act, S.C. Code of Laws §30-2-50, prohibits a person or private entity from knowingly obtaining or using any personal information obtained from the Medical University of South Carolina or other state agencies for commercial solicitation directed to any person in this state. Commercial solicitation as defined in the Act means contact by telephone, mail, or electronic mail for the purpose of selling or marketing a consumer product or service. A person who knowingly violates this prohibition is guilty of a misdemeanor and subject to the penalties specified in S.C. Code of Laws §30-2-50(D).

I have read, understand, and agree to abide by the Family Privacy Protection Act. I will not use any personal information I may receive as a result of this request for purposes of commercial solicitation or in violation of law.

Signed: _____ Date: _____

To Submit FOIA Requests and for Additional Information, please contact:

FOIA Officer
Medical University of South Carolina
179 Ashley Avenue, MSC 003
Charleston, SC 29425

Phone: (843) 792-0570
Email: FOIA@musc.edu

Records to be:

- ____ Picked up by requester;
- ____ Mailed, if so, estimate mailing cost _____;
- ____ Sent by overnight delivery, if so, estimate cost _____.

Estimated grand total for request fulfillment: _____.

Estimated cost communicated to requester on (date) _____ by mail (letter with copy of this form).

Advance payment of estimated cost received from requester by ____ Cash or ____ Check (made payable to Medical University of South Carolina) on (date): _____.

Cost waived due to: ____ Grand Total does not meet \$25 threshold;
____ Other reason (explain in detail):

(Requester's signature with date above on receipt of estimate, please return signed form to MUSC)

(MUSC representative's signature with date when copies are mailed to requester)

(MUSC representative's signature with date when signed form is received)

(Requester's signature with date above on receipt of copies, please return signed form to MUSC)