



Edward Waters University OIPRE Data Request Form

Please complete this online form to request data from the Office of Institutional Research and Effectiveness. After submitting your request, you will be contacted within 2 business days to confirm receipt of your request and provide an approximate timeline for delivery of the data/information requested.

Our timeframe for responding to data requests can vary depending on the complexity of your request and our current workload. To ensure that we can meet your desired timeline, please submit your request at least two (2) weeks prior to when the information will be needed. Your preferred dates will be accommodated to the best of our ability.

Contact Information:

Today's Date	MM/DD/YYYY
Full Name	Last, First
Email Address	
Department/Office	
EWC Status/Role	<input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Other (specify)

Data Request

- *What data do you need?* Please provide a description of the parameters of the request (i.e. specific semesters, cohorts, majors, degree types, gender, etc.). Examples of data requests: Spring 2015 Student Enrollment sorted by Ethnicity; Faculty and Staff counts for year 2020 sorted by Department; Degrees awarded during 2015-2020 sorted by Gender; etc.

It may also be helpful to frame your request in the form of a question so that we can determine the most appropriate data to send you; what question are you trying to answer?

- *What is the purpose of your request:* (check all that apply)
- | | | | | |
|---|--|---|--|--|
| <input type="checkbox"/> Accreditation/
Compliance | <input type="checkbox"/> Exploratory | <input type="checkbox"/> Grant
Development | <input type="checkbox"/> Program
Review | <input type="checkbox"/> Student
Outreach |
| <input type="checkbox"/> Research | <input type="checkbox"/> Departmental
Reporting | <input type="checkbox"/> Grant
Reporting | <input type="checkbox"/> Major Field
Assessment | <input type="checkbox"/> Budget
Planning |
| <input type="checkbox"/> Other (specify) | | | | |

- *What/Who will be the intended audience for this data?* Indicate if the information will appear in an internal or external report or document and the target audience to receive the requested data.

- *When do you need this by?* Please allow at least 2 weeks for the request to be processed. Your data may be ready sooner depending on the complexity of the request and other departmental priorities.
MM/DD/YYYY

- *How often will you need this data?* (This will help us accommodate recurring tasks).
- Once
 - Every semester
 - Every year
 - Other

Additional Information

- *Please provide any additional information or documentation that would help in the completion of this request (e.g., the report or table being populated.)*

Upload

Submit

For Office Use Only

Name of Project/Report: _____

Date Request Received: _____

Type of Request: Internal State Federal Institutional Effectiveness Other _____

Staff Members Assigned: _____ *Negotiated Deadline Date:* _____

Date Completed: _____ *Number of Staff Hours:* _____