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## **DATA AND INFORMATION REQUEST**

(If you need assistance completing this form, please contact Institutional Research.)

Name of Requestor:	Date of Request:
Organization/Department:	Position:
Telephone Number:	_ Email Address:
Requested Completion Date:	
Detailed Description of Request (purpose, des	scription, population, timeframe of
requested data*, etc.) *NOTE: Timeframe = Term(s) and Year(s)	
How will this information be used?	
Will the information/research be published and if so, where?	
How will the confidentiality and security of the information be assured?	