Data Request Form

Office of the Registrar

Name: ___________________________________ E-Mail: ___________________________________
Ext.: ______________________________

Date Requested: ____/____/_________  Date Needed: ____/_____/__________

*All requests must be approved by the registrar and given a minimum of 5 working days for processing*

Purpose of request for information:

___________________________________________________________________________________
___________________________________________________________________________________

Define the selection criteria (e.g. all 1L, full time, females from Colorado in the Business Law concentration with a GPA or 77 and above, with blond hair and blue eyes):

___________________________________________________________________________________
___________________________________________________________________________________

What data fields are needed for this selection (e.g. Name, ID, Campus Box #, Advisor, etc.):

___________________________________________________________________________________
___________________________________________________________________________________

How do you want this data sorted (e.g. By Class – Ascending, By Name – Descending):

___________________________________________________________________________________

What medium do you wish the data to be on?

□ Attached to E-Mail (choose 1):
  □ Excel File  □ Delimited Text File  □ Avery 5160 Label Format (must provide)  □ Print Ready Document (pdf)

For use by the Office of the Registrar

Approval: ___________________________________ Date: ____/____/_______
Completed By: ___________________________________ Date: ____/____/_______