INSTITUTIONAL RESEARCH
Information Request Form
Contact information: (760) 245-4271 ext. 2648, Admin. Annex, clairm@vvc.edu

<table>
<thead>
<tr>
<th>Requestor Information</th>
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<tbody>
<tr>
<td>Name:</td>
<td>Date of Request:</td>
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<tr>
<td>Phone w/ ext.:</td>
<td>Date information is needed:</td>
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<tr>
<td>Email:</td>
<td>Date received in research office:</td>
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<td>Location on campus:</td>
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Supervisor signature:

### Helpful Indicators for Creating Requests

(After answering the following questions, describe your request in sentence format below.)

**Who is your sample?**
- [ ] Students
- [ ] Faculty
- [ ] Staff
- [ ] Community
- [ ] Other

**Where to find your sample?**
- [ ] Department
- [ ] Discipline
- [ ] Course
- [ ] Section
- [ ] Collegewide
- [ ] State
- [ ] City
- [ ] Zip code
- [ ] High school
- [ ] Other

**Time Frame**
- [ ] Summer
- [ ] Fall
- [ ] Spring
- [ ] Years _____ - _____
- [ ] Dates from _____ - _____
- [ ] Fiscal year (July 1st - June 30th)
- [ ] School year (Fall to Summer)
- [ ] Calendar year

**Knowledge gained from sample**
- [ ] Gender
- [ ] Race/Ethnicity (provide example)
- [ ] Age (provide example)
- [ ] Headcount (duplicated)
- [ ] Headcount (unduplicated)
- [ ] Retention
- [ ] Persistence (please circle one)
  - [ ] term to term
  - [ ] year to year
- [ ] Grade distribution
- [ ] Degrees/certificates
- [ ] Success rate
- [ ] Other

**Data Format**
- [ ] Spreadsheet (e.g. demographics)
- [ ] Report
- [ ] Statistical Analysis
- [ ] Statistical Analysis & Report

**Description of request** (Please use the back of this form and be as specific as possible) Attach any documentation that may be needed to acquire data for your request.