

INSTITUTIONAL EFFECTIVENESS AND ASSESSMENT

Data/Information Request Form

Date of the request:

Name:

E-mail:

Title:

Department:

Date requested information needed:

(please allow at least two weeks for data processing)

The maximum number of characters allowed in a fill in box is 270 characters.
If you need additional space, please continue on a separate sheet of paper.

Purpose of the requested information:

Questions guiding the inquiry:

Intended use of the information:

I understand that the use of the data is for assessment or educational effectiveness purposes only. I agree to provide a copy of reports, data summaries, descriptions of decisions made, or other appropriate information resulting from use of the data. The information will be used to document use of data to guide assessment activities, improvement efforts, and resulting decisions. A copy of the information will be forwarded to IEA (agmatveev@nsu.edu) by the requestor within five days of completion.

Requestor: _____
Signature

REVIEW OR APPROVAL

School/Division Assessment Coordinator, School Dean or VP: _____ Date: _____ Reviewed:
Signature

Associate Director, IEA: _____ Date: _____ Reviewed:
Signature

AVP Academic Affairs/Director, IEA: _____ Date: _____ Approved:
Signature Disapproved: