

Livingstone College
Office of Institutional Effectiveness and Research

DATA REQUEST FORM

NOTE: Please complete all sections of the Data Request Form. Upon completion, please email Mrs. Macon-Jamison macon@livingstone.edu. Someone from IE/IR may contact you by phone or email to discuss your request.

Name _____ Date of Request _____

Department _____ Phone Number _____

Email Address _____

This request is being made by: ___ Faculty ___ Staff ___ Student ___ Other

Request needed by: _____
(Please note that request may take up to a week during busy periods)

Purpose of Request

Please give a brief reason for making this request and how you will be using data (e.g. grant writing, assessment report, etc.).

Description of the Request

Please provide a detailed description of the data requested (e.g., student enrollment, retention rates, classifications, etc.).

Terms

Indicate the years/semester/sessions desired

Selection Criteria

Please indicate the selection criteria for the student population (e.g., Traditional, first-time students, returning students, full time, part time, etc.).

Preferred format of results: ___ Excel ___ PDF ___ Printed

Please provide any other information relative to your request.