



UNITED TRIBES TECHNICAL COLLEGE
Office of Institutional Research: **Data Request Form**

All data requests from the Office of Institutional Research require completion of the request form below. Requests will be responded to on a case-by-case basis according to timing and workload. Please allow a minimum of 5 business days.

All requests must adhere to guidelines set forth by the Family Educational Rights and Privacy Act (FERPA) and other privacy policies and laws.

To submit a completed form, save as a new PDF and email as an attachment to OIR@uttc.edu.

Requester Name: _____	Date: _____
Institution/Organization: _____	Phone: _____
Email Address: _____	Date Needed: _____
Summary of request, including purpose for making this request (e.g. grant proposal, report, assessment, etc.) and the main question(s) you are trying to address or answer.	
Intended Use of Data:	
Is the data already available on the UTTC IR web page?	<input type="radio"/> No <input type="radio"/> Yes (if yes, this request not needed)
Will the requested data be shared outside of UTTC?	<input type="radio"/> No <input type="radio"/> Yes
Will the data be widely shared publicly?	<input type="radio"/> No <input type="radio"/> Yes
Student Data Needed: (see Data Dictionary for definitions of terms)	
Type of Student	<input type="checkbox"/> All <input type="checkbox"/> FTEIC <input type="checkbox"/> FTFT <input type="checkbox"/> FTPT <input type="checkbox"/> Transfer <input type="checkbox"/> Returning <input type="checkbox"/> Continuing
Student Characteristics	<input type="checkbox"/> All <input type="checkbox"/> 1 st Gen <input type="checkbox"/> Race <input type="checkbox"/> Pell <input type="checkbox"/> Gender <input type="checkbox"/> Marital <input type="checkbox"/> In-State
Other Characteristics	_____
Student Level	<input type="checkbox"/> All <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Early College
Program Level	<input type="checkbox"/> All <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Associate <input type="checkbox"/> Bachelor <input type="checkbox"/> Non-Degree
Specific Course(s)	_____
Specific Major(s)	_____
Terms	<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> CEU
Academic Year(s)	_____
Leading Indicators	<input type="checkbox"/> Early Alerts <input type="checkbox"/> Grades <input type="checkbox"/> Credits Earned <input type="checkbox"/> Completion Rates
Student Outcomes	<input type="checkbox"/> Persistence <input type="checkbox"/> Retention <input type="checkbox"/> GPA <input type="checkbox"/> Completion
Other Outcomes	_____
Non-Student Data Requested (e.g. faculty and staff counts, student learning assessments, survey data)	
How do you want the data sorted or grouped? (e.g. by ethnicity, gender, department, etc.)	
Deliverable Format <input type="radio"/> Table <input type="radio"/> Chart <input type="radio"/> Graph <input type="radio"/> Dashboard <input type="radio"/> Executive Summary	