

Institutional Research - Data Request Form

Please complete and email to your dept. dean. Administrative Services please submit to your dept. V.P. Form will be reviewed and forwarded to CORE.

Research and Evaluation Please complete ALL of the following	informatio	n:			
Select site of data request (all that apply):	: R	С	MCCC	OCC	
Date: Name & Title:					
Department/Committee:					
Email address:	SS: Phone number/extension:				
Project Title:	Date	Date Needed:			
Will this be a recurring request?	Yes	No			
If yes, how often and when does it need to be scheduled?					
The information will be used for the following (check all applicable):					
Accreditation Requirement			State/Federal Requirement		
Matriculation			Program Review		
SLO Assessment			Grant Submission/Report		
College-wide Project			Department/Program Project		
Distance Education Plan (link)			Student Diversity and Equity Plan (link)		
Student Success & Support Plan (link)			Educational Master Plan Final (link)		
Individual Faculty/ Staff Project: (please describe in box below)			Other: (Please describe in box below)		
Please describe the project, be as detailed as possible. Attachments (grant description, past years' data, etc.) email to: core@reedleycollege.edu.					
Attachments (grant description, past years data, etc.) email to: corecined educyconege.edu.					