

DATA REQUEST FORM - UNIVERSITY REGISTRAR'S OFFICE
RWU Community use ONLY - Allow a minimum of 5 business days for report completion

Name: _____ Dept. /School: _____ Email: _____ Phone Ext: _____

1.) Report Request Description: _____

What is the purpose of the request? Required Field

2.) Specify date range by choice of Term/s or Academic Year: _____

3.) Check Academic Level/s: Undergraduate/UG Graduate/GR
4) Check Academic Levels & Program/s for UG students
 Day Program – UGDP Continuing Studies – UGCS

5.) Check Division for UG and/or GR students:
 FCAS GSB SJS SCS
 SEECM SED SHAAP

6.) Check Class Level for students (UG only):
 Freshman (any UG student with less than 27.00 credits completed)
 Sophomore (any UG student with great than or equal to 27.00 and less than 57.00 credits completed)
 Junior (any UG student with great than or equal to 57.00 and less than 87.00 credits completed)
 Senior (any UG student with great than or equal to 87.00 credits completed)

7.) New Students for (UGDP students starting during a Fall or Spring Term only) specified by term selected above:
 Freshman (enrolled as a new first time student when admitted to RWU) Graduate Student
 Transfer (enrolled as a new transfer student when admitted to RWU)

8.) Other specifications for selection of students: _____

9.) Counts or Details of records:
 Counts of records (no details)
 Details of students (check data elements

below) Demographic Information:

- | | |
|--|--|
| <input type="checkbox"/> ID | <input type="checkbox"/> International Flag/Alien Status |
| <input type="checkbox"/> LFM Name | <input type="checkbox"/> Age |
| <input type="checkbox"/> Date of Birth | <input type="checkbox"/> Ethnic/Race |
| <input type="checkbox"/> Mailing Name (Ms. Jane A Student) | <input type="checkbox"/> RWU Box |
| <input type="checkbox"/> Home/Best Address (address lines, city, state, zip and country) | <input type="checkbox"/> RWU email |

Academic Information:

- | | | |
|---|---|---|
| <input type="checkbox"/> AcademicLevel | <input type="checkbox"/> Academic Program | <input type="checkbox"/> Major |
| <input type="checkbox"/> Additional Major/s | <input type="checkbox"/> Minor/Additional Minor | <input type="checkbox"/> Core Concentration |
| <input type="checkbox"/> Start Term | <input type="checkbox"/> EnrollStatus | <input type="checkbox"/> Registered Credits |
| <input type="checkbox"/> Term GPA | <input type="checkbox"/> AdvisorName | <input type="checkbox"/> Advisor RWU Email |
| <input type="checkbox"/> Cumulative GPA | <input type="checkbox"/> Alternative Cumulative Completed Credits | |
| <input type="checkbox"/> Dean's List | <input type="checkbox"/> Graduation Date | |
| <input type="checkbox"/> Other requested data elements: _____ | | |

Requestor's Signature: _____ Dean/Department Head Signature: _____

University Registrar's Office Use Only:			
Date Received: _____	Comments: _____	Date Completed: _____	Rev. 4/3/14