



## AD HOC REQUEST FOR STUDENT DATA

*Please submit your request on the form below. The campus policy on Accessing Student and Course Data can be found in the Campus Administrative Manual at: <http://www.admin.uiuc.edu/cam/CAM/iii/iii-15.html>, and the Student Code, Article 3 Part 6.*

Requestor Name: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
 Position/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Department Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Mail Code: \_\_\_\_\_

Have we provided this report before?  Yes  No

There may be a charge\*\* assessed for fulfilling this request. Bill charges to:  Requestor  Other

\*\*Effective 1/1/09, data requests will be billed at the following rates:

- \$150 for a newly created report
- \$ 25 for a standard rerun of an existing report
- \$ 50 surcharge for requests requiring less than two weeks turnaround, provided the Office of the Registrar is able to meet the Requested Completion Date. Willingness to pay the surcharge does not guarantee expedited processing.

**Insufficient account information will delay or discontinue the fulfillment of this request.**

<b>C-FOAPAL String:</b>	-	-	-	-	
<b>Campus (1 digit)</b>	<b>Fund (6 digits)</b>	<b>Organization (6 digits)</b>	<b>Account(optional) (6 digits)</b>	<b>Program (6 digits)</b>	

\_\_\_\_\_ *Valid Account Name or Registered Organization*

\_\_\_\_\_ *Contact Name for C-FOAPAL String*

Responsible Party for requested data:  Requestor  Other: \_\_\_\_\_

For additional information, contact :  Requestor  Other: \_\_\_\_\_

How will this data be used: \_\_\_\_\_

Term/Year Requested (Fall, Spring, Summer): \_\_\_\_\_

Which students should be included on the report (those from a given program, registered in a certain term, etc.):

Information to be included on the report (name, class, program, ethnicity, address, college, email etc.):

For address information select:      Mailing Address      Permanent Address or Other: \_\_\_\_\_

In what order should the report present its data (first name, last name, zipcode, class, etc.):

Output format required:      Excel      Mailing Center to Student      Mailing Center to The Parent of

Where should we send the output if different from the above (e-mail address)?

Requested completion date: (*normal processing takes 2-6 weeks*): \_\_\_\_\_

Provide a Terminal Date this data will be destroyed: \_\_\_\_\_



## AD HOC REQUEST FOR STUDENT DATA (CONTINUED)

Conditions for Use of Student Information:

1. Non-academic units must provide the Office of the Registrar with a sample of materials to be sent to student population.
2. Student data may **NOT** be reproduced, either electronically or manually, without the express written consent of the Registrar or the Registrar's designated proxy.
3. Individual student data may **NOT** be retained, archived, or electronically stored. Data that identifies a specific student or students must be destroyed by the Terminal Date listed above, or within 30 calendar days of receiving the requested data from the Office of the Registrar.

I acknowledge that the Office of the Registrar is not responsible for any subsequent dissemination of data. In accepting the data as requested above, I agree to comply with all UIUC regulations governing access and release of student information as described in: the *Student Code* and the *Campus Administrative Manual*. If I use this information for research, I will comply with policies of the Institutional Review Board, as outlined in the *Handbook for Investigators: For the Protection of Human Subjects in Research*.

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Signature of Requestor

Date

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Signature of Dean of Students

Date

(Required for data used to survey or contact current students outside of a single academic unit)

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Signature of Faculty Research Supervisor or Department Head  
 (Required for research data supplied to graduate student requestors)

Date

**This form may be returned by mail to:**

Cheryl Tate  
 Office of the Registrar  
 MC-063  
 901 West Illinois Street  
 Urbana, IL 61801-3028

**Questions about requesting student data should be directed to:**

Cheryl Tate  
 Phone Number: (217) 333-2034  
 Fax Number: (217) 265-8457

**Questions about the process for requesting undergraduate applicant data should be directed to:**

Thomas Skottene at (217) 265-5392

**Questions about the process for requesting graduate and professional applicant data should be directed to:**

Beth Kibler at (217) 244-4637