



## INTERNAL RESEARCH REQUEST FORM

Please complete the following questions as fully as possible, and email to [jbolas@bates.ctc.edu](mailto:jbolas@bates.ctc.edu). You will be contacted normally within five days to discuss and confirm your request. Please complete the form electronically, and use as many pages as you feel you need to accurately describe your request.

Contact Name	<input type="text"/>
Contact Email	<input type="text"/>
Contact Phone	<input type="text"/>

### DESCRIPTION OF DATA REQUEST

FOR WHAT PURPOSE WILL RESEARCH BE USED? (E.g., program review, new program proposal, state or national reporting, peer comparisons, grant requirements, etc.) Do you have particular items or questions that need to be answered? If so, list here:

WHO WILL HAVE ACCESS TO THE FINAL REPORT OR INFORMATION? This may affect the level of detail included in your report, and the presentation of certain types of data. Some data and information may be considered commercially sensitive, and restrictions on access to research reports by external bodies may be recommended.



STRATEGIC GOAL TO WHICH THIS REQUEST RELATES. How will data be used to support Bates's strategic plan or current Presidential Initiatives? (You can find the current Strategic Plan and Presidential Initiatives on the Institutional Research department intranet pages)

RESEARCH PARAMETERS (e.g. student gender/program/dates of enrollment, or industry sector, zip code areas, etc.)

HUMAN SUBJECT RESEARCH: Does your research comply with the guidelines for exemption as described in the 'Ethical Guidelines for Research Involving Human Subjects' document (available on the Institutional Research Department Intranet pages)?

CAMPUS LOCATION(S) to which this request relates –

Downtown \_\_\_\_\_ South \_\_\_\_\_ Mohler \_\_\_\_\_

DATE INFORMATION IS REQUIRED \_\_\_\_\_

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For Department of Institutional Research use:

Request confirmed	Date _____	INIT _____
Request registered	Date _____	INIT _____
	Log number _____	
	HS Exempt? YES NO	
Research plan agreed	Date _____	INIT _____
Report complete	Date _____	INIT _____