

RE Request Form

Please allow **5 working days** for requests to be completed. Larger projects may require more notice

Requisition Information

Date of request:

Requested by:

Date required:

Purpose

Informational

Mailing

Date of Mailing

Reason for Requesting Information

Type of Records

Individuals

Organizations

Both

Record Type

Alumni

Faculty/Staff

Parent

Please explain criteria:

Output Information

Constituent ID

First Name

Last Name

Addressee

Salutation

Primary Address

Home Phone

Cell Phone

E-mail

Solicitor

Primary Business Info (name, position, address & contact)

Primary Alumni Info (class year & major)

If other output, please explain:

Sort & Exclusions

Sort

Last Name

Class Year

Other sort:

Exclusions

Invalid Address

Deceased

Do Not Mail

Do Not Solicit

Frequency of Request

One-time

Annually (please request each year)

Other Comments or Special Instructions:

****For Database Administrator Use Only****

Completed by:

Completed

Date:

Query Name:

Export name: