Office of University Advancement & Alumni Relations

Data Request Form



(Please submit two wee	eks before deadline)			
Requested by:		Purpose:		
Date of Request:		☐ Mailing ☐ Phone ☐ Other: (Please Specify):		
Date Needed:		Email Event		
Name of Project:		Appeal Code:		
Criteria: (Who should b	e included on the list/re	eport)		
🗆 Alumni	□ College			
Undergraduate		ID \Box CHBS \Box Waldron \Box CSAT \Box CVPA		
Graduate	Parents			
Non-degreed	Current			
□ Faculty/Staff	□ Former			
Current	Varsity Athletes			
Retired	Other (please spe	cify):		
□ Friends	Free text area			
Exclusions: (Who shou	ld NOT be included on	the list/report)		
□ Athletic Foundation Board Members		No Email		
□ Board of Visitors		No Mail		
Current Students		No Phone		
		Real Estate Foundation Board Members		
□ Faculty/Staff		□ Other (please specify):		
Former Varsity Athletes		Free text area		
Foundation Board M	lembers			
International Addres	ses			
Output: (What informat	ion should be on the lis	t/report)		
Standard Output (Names, Addresses,		□ Other (please specify):		
Emails, Phone Numbers, etc.)		Free text area		
CampusCALL Data	Load			
□ Giving History (Last	Gift Amount, Date			
and Designation)		Household Out?		
For Advancement Services Use Only:				
Reviewed and Received	d by:			
Query name:				

Export name:	
File name [.]	

Completed	by:

Date Completed: