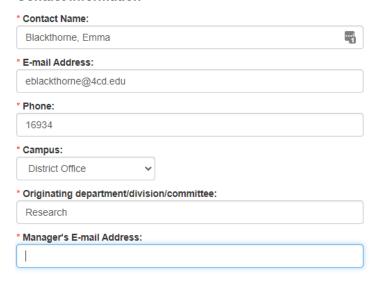# District Research Service Request Form

Before submitting a request, please review the content with your college's Planning Coordinator.

\* required

## Contact Information

\* **Contact Name:**

Blackthorne, Emma

\* **E-mail Address:**

eblackthorne@4cd.edu

\* **Phone:**

16934

\* **Campus:**

District Office

\* **Originating department/division/committee:**

Research

\* **Manager's E-mail Address:**

## Request Description

\* **Report Title**

Please be specific. We will be generating a report or survey in conjunction with your request and would like you to give us a short title (120 character limit). This will help us locate any reports or data associated with this request in the future.

Characters remaining: **120**

\* **Date Needed**

Specify the delivery date by which the research report must be completed in order to meet any deadlines.

(The pre-filled default date allows 14 working days to complete.)

1/27/2021

# District Research Service Request Form

## Request Details

**\* Describe your request in detail**

Please provide your research question(s) or request below with as much detail as possible, including term and year.

(For example: What percentage of students who successfully complete MATH-94 (Statway I) in Fall 2015 go on to successfully complete MATH-144 (Statway II) by Fall 2016?)

[ ]

**\* Specify the population of interest including important qualifiers** (e.g., first-time students, cohorts, groups, etc.) **and any demographics required** (e.g., race/ethnicity, gender, age, etc.)

[ ]

**\* Time Frame**

(Check the time frame that most closely describes your request. Specific time frames should be included in the request description, above.)

○ **Current term**          ○ **Multiple years**

○ **Most recent academic year**   ○ **Not Applicable**

○ **Multiple terms**

**\* How often will this request need to be fulfilled?**

(**Note:** A new request will have to be submitted each time unless a SQL report can be created to satisfy an ongoing demand.)

○ **One time only**      ○ **Yearly**

○ **Weekly/Monthly**   ○ **Other**

○ **Each term**

[ If other, please explain... ]

# District Research Service Request Form

* required

## Primary Area of the Request

**\* What is the broad research question? How will you use the information?**

(For example: I want to know if accelerated math improves student success.)

[                                                              ]

**\* Select the area that most closely matches the reason for your request:**

| | |
|---|---|
| ○ | **Accreditation** |
| ○ | **Enrollment Management** (For example: Program Review, Marketing, Outreach, Course Success, Student Enrollments, Awards, High School Special Admit, etc.) |
| ○ | **Dashboard Modifications** |
| ○ | **Local College Plans and Reporting** (For example: Educational Master Plans, Facilities plans, etc.) |
| ○ | **State and Federal Plans and Reporting** (For example: Equity, Guided Pathways, CCAP/Dual Enrollment, Various Grants, etc.) |
| ○ | **Survey Development** |

# District Research Service Request Form

\* required

## Upload Related Documents

Please upload any relevant information needed to complete the request, such as lists or forms.
(You may upload multiple files.)

[Choose File] No file chosen

No files have been uploaded.

[Upload File]

# District Research Service Request Form

\* required

## Prioritization and Scheduling

Priority of service is assigned based on:

1. the purpose of the requested research,
2. its relative urgency,
3. the resources required for completing it, and
4. the order in which requests are received.

After your college planning coordinator approves the request, the research department will evaluate and assign the request. We will contact you if we need clarification.

Please let us know if you want facilitation or interpretation of the information by contacting **Emma Blackthorne** of the 4CD staff.