

REPORT REQUEST FORM FOR STUDENT INFORMATION
Fax Completed Form & Enclosures/Letters to Registrar's Office at # 3050

**All reports will be emailed to requestor unless otherwise discussed.*

Date Requested: _____ Date Needed: _____
Department: _____ (1 week approval & process time; some requests take longer)
Contact Person: _____ Title: _____
Phone #: _____ Email: _____ @murraystate.edu*

Your signature acknowledges the following conditions:

- The information will only be used for the reason stated below
- The information will ONLY be used for your department and NOT be released to any third party for use or distribution
- **Failure to comply with all conditions may result in refusal of future requests**

Signature: 

Purpose for Request (You MUST attach a copy of all letters & enclosures for approval)

Check/Circle ALL that Apply

- Enrolled for _____ Semester NOT enrolled for _____ Semester
- Pending degrees for _____ semester (*circle all that apply: Assoc., Bacc., Master's/Specialist*)
- Other _____

Level/Classification

- ALL
- Undergraduate (FR SO JR SR Include Visiting, Post-Bacc, and Other Undergrads)
- Post – Baccalaureate
- Graduate

Educational Goal

- ALL
- Degree-seeking
- Non-degree seeking (*includes Visiting, HS Dual Enrollment, 5th YR, Rank I Certification*)

Student Type

- ALL
- New Freshmen New Transfers
- Other _____

Curricula

- Area/Majors _____
- Minors _____

Gender

- ALL
- Male Female

Time Status

- ALL Half Time
- Full Time Less Than Half Time

Other Criteria – be VERY SPECIFIC. (ex: Freshmen Art Majors on Dean's List)

Information to include on report:

- M# Email
- Name Mailing Address (**circle** Local, Permanent, on campus only)
- Class/Level Blackboard listserv
- Curricula Other _____

Pop Sel
Cognos
DB

Date Processed _____ Encryption _____ Initials _____