

NEVADA DEPARTMENT OF EDUCATION
Data Services & Research (DSR) REQUEST FORM
12/1/2010

Instructions: Please complete all items and return the form to apacinfo@doe.nv.gov.

Contact Information

Title:	Name:
Org/Dept.:	Address:
Phone number:	E-mail address:

Key Dates

Date of Request:	Date Preferred for Requested Deliverable(s):
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Request Type

<p>Examples of types of requests</p> <p>1) Data Table Only (link to examples)</p> <p>2) Data Services (link to examples)</p> <p>3) Research Study Design and/or Implementation (link to examples)</p>	
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Key Questions

1) Are you under contract with the NDE already? If so, who is your NDE contact?	
2) Does this data request contribute to a study that requires an Institutional Review Board (IRB) or similar institutional approval? <i>If so, please attach evidence of approval.</i>	
3) Does your data exist from a publicly-available source, such as the Nevada Department of Education (http://nde.doe.nv.gov/) or the Nevada Report Card websites (http://www.nevadareportcard.com)?	
4) Have you requested the same data in previous years from NDE? <i>If so, please attach last year's request results or product.</i>	
5) If you asking for data specific to individual students, what is your plan for ensuring that confidential student information will be secure and FERPA-compliant?	
6) Do you prefer data tables in Excel, SPSS, CSV, or flat file format)?	
7) If you are requesting support with a research study/evaluation, state your study question(s) here:	

DSR Request Requirements:

Describe the information that you are requesting. Please describe in detail the data that you are requesting APAC to provide and the purpose for which the data will be used. Please be specific. Use additional pages as necessary to provide any additional information. Please attach any other documents (forms, instructions, or definitions of data) that you feel are necessary.

The Nevada Department of Education operates within the guidelines of the Nevada Public Records Act (NRS 239.001) and the Family Educational Rights and Privacy Act of 1974.

Signature

Date

For Departmental Use Only

Name of person taking request:
 Staff assigned:
 Expected completion date:
 Date completed: