

**Originator**

Name: \_\_\_\_\_ College/Department: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Date Expected: \_\_\_\_\_

Priority:            High            Medium            Low

**Constituent**

Name: \_\_\_\_\_ UID: \_\_\_\_\_

Occupation/Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Type of Information Requested:**

\_\_\_\_\_

Additional information about request or known information about prospect to aid in research

\_\_\_\_\_

Please note: Research results will be delivered via the Banner record. You will be emailed when request has been completed.