

Request for Survey Recipient Contact Information



Date:

Your name:

Department:

Phone:

Email:

Office of Academic Planning and Assessment
2121 Eye Street, NW, Suite 102
Washington, DC 20052
Phone: 202.994.2103
Fax: 202.994.1985
Email: apira@gwu.edu

Survey title:

Reasons for conducting survey:

Proposed dates of data collection:

Describe the general scope or purpose of the survey (e.g., what you want to learn from the results).

What group(s) do you plan to survey (e.g., undergraduate international students; students doing internships)? Be as specific as possible.

How will the results (data collected) be used (e.g., what will you do with the information after you analyze the data)?

How will the confidentiality or anonymity of the people being surveyed be assured?

Type of information required (check all that apply):	
<input type="checkbox"/> Mailing labels	
<input type="checkbox"/> Email addresses	
<input type="checkbox"/> Phone numbers	
<input type="checkbox"/> Other	Please specify: <input type="text"/>
Date information needed:	<input type="text"/>

Questionnaire respondent contact information must not be shared with or provided to other offices or to other individuals (either internal or external to GW) and must not be reused to administer other questionnaires without written permission from the Office of the Associate Provost for Academic Planning and Assessment. When questionnaire data to be stored on computers, servers or other devices is confidential per the University's Data Classification Security Policy, the device must be password protected and encrypted in accordance with the Information Security Policy_and Mobile Device Security Policy. Policies are available at <http://policy.gwu.edu>.

Requestor Approval

Print Name:

Date:

Signature: _____

Department Head Approval*

Date:

Print Name:

Signature: _____

*If submitting form online, have your department head send an email with his or her approval to: apira@gwu.edu.

NOTE: If the survey is part of a research project please include a copy of the approval granted by the Institutional Review Board (IRB).

Please include a copy of the survey instrument or questionnaire with this request.