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|  | **DATA REQUEST FORM**  **DHE DATA AND EVALUATION TEAM**  **Please email the completed form to support@e2fulton.org** |

|  |  |
| --- | --- |
| Date |  |
| Requesting Entity (*Funded agency, role, contact info such as email, phone number)* |  |
| Purpose for Request |  |
| Data Being Requested *(include timeframe for request i.e., all clients in CY22; please be as specific as possible)* |  |
| Requested Completion Date |  |
| *FOR DHE USE ONLY:* | |
| DHE Notes |  |
| Person(s) Assigned |  |
| DHE Approval |  |
| Date Completed |  |
| Date Sent  (Send w/Read Receipt) |  |
| Read Receipt Date |  |