

Data/Report Request

Data Warehouse Service



District: _____ Date Submitted: _____

Submitted by: _____ Date Required: _____

Note: Please allow 10 business days for report requests once additional request for services is received (when applicable)

Please complete the following information to accurately describe the report you are requesting.

Purpose of this Report:

Report Heading: *What do you want the title of this report to be?*

Body of Report: *What information do you want included on the report? Please list the data elements and attach a sample report or file layout.*

Report Totals: *Describe any counts or totals to be included on the requested report*

Sorting Requirements: *What order do you want the data on the report to be in? For example, alphabetically by school district, descending order by percent attained*

Page Break: *When should the report start a new page? Ex: how many items per page when displaying multiple choice percent correct*

Additional Information: *Please note any additional information that needs to be considered when developing this report; when possible, please send a sample report or file layout*

Send your completed request to sirshelp@btboces.org

Date:

To be completed by SCRIC staff:

Date Request Received: _____

Estimate Provided to Customer (date): _____

ARFS Received from Customer (date): _____

Programmer Assigned: _____

Report Name: _____

Report Completion Date: _____

Actual Programming Time: _____

Report Delivered to Customer (date): _____