University of Hawai‘i

ACCESS REQUEST TO DATA AND REPORTS IN OPERATIONAL DATA STORE (ODS)

Name	Date
Title	UH Username
Campus /Office /Department/Address	
Phone	Email

Employment Status ☐ Permanent Regular ☐ Casual ☐ Other: _____

Reason for Requesting Access

Report Access

Please list Discoverer Report by Number/Title and Reporting Role. If unknown, describe type of Discoverer Report (attach separate sheet if necessary).

Report Number/Title	Reporting Role
Report Number/Title	Reporting Role

Data Access

Please list data request by table or view and describe intented use of data. Include campus, data elements, term needed and duration of the project. (attach separate sheet if necessary).

Data Request	Data Request	Data Request
Data Request	Data Request	Data Request
Data Request	Data Request	Data Request

IP:

Authorization

I approve this request for access:

Supervisor’s name (print or type)	Signature	Date
Dean/Director/Chancellor’s name (print or type)	Signature	Date
Campus FERPA Officer’s name (print or type)	Signature	Date

Send completed form to: Institutional Research Office • 1633 Bachman Place • Sinclair Annex 2 Room 4 • Hon. HI 96822
Fax: 808-956-9870

Access ☐ Approved ☐ Denied

ODS Data Administrator’s name (print or type)	Signature	Date