

# MPC – Office of Institutional Research

## Research Request \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Name \_\_\_\_\_ Date: Date \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Phone \_\_\_\_\_ MPC email: email address \_\_\_\_\_

Project Title: \_\_\_\_\_ Project Title \_\_\_\_\_

Originating Department/Division/Committee: \_\_\_\_\_ Department \_\_\_\_\_

### Project Description (one research project request per form, please):

What population or groups are you interested in?

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What question(s) are you trying to answer?

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How do you plan to use this information to improve the college or district?

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What is your desired completion date? \_\_\_\_\_ Desired completion date \_\_\_\_\_

### Please check each of the following that apply:

- This project is required for departmental, divisional or institutional accreditation.
- This project will indirectly assess student learning (e.g., persistence, pass rate, graduation, transfer).
- This project will provide data for a grant proposal.
- This project will provide data for a grant accountability report.
- This project is needed for State, Federal or Chancellor's Office requirements.
- This project will help us measure objectives or outcomes specified in our Strategic Plan.

Please return your request to Rosaleen Ryan, PhD. Director of Institutional Research