

The Office of Institutional Research, Planning, and Assessment Survey Request Form

Request Submitted:			
Name of Person Making Request:	Γ	Department:	
Date Submitted			
Email:	Phone:	Fax:	
Survey Services Requested (check all to Design and administer a new su Administer a survey that is alreating no revisions are need Other:	rvey dy in existence led □ revisi		
Survey Title: Purpose of Survey: Include a detailed of		vey including the intended use of the inform	 mation:
Target Population: Please be specific (e.g., all levels of stud	ents, undergraduates only, faculty, staff, e	ic.):
Have we administered this survey for y If so, when was the last time? Is this survey for academic research ar	-		
questions to us in electronic format (e.	g. Word document) a ectly to discuss the re	nt included on your survey, please send the along with this request form. Once received equest, review submitted questions and of tive and unbiased.	, the
Please select survey delivery method(s	s): 🗆 online (hyperlin	nk) 🗆 paper 🗆 both:	
Do you plan to offer some type of incer	ntives? (e.g., cash priz	ze, give-aways, etc.) □ Yes □ No	
Would you like a survey report complie □OIPRA will analyze data and prod □ OIPRA will analyze data and prod	uce report with graph	ns and charts in PDF format	
When should the survey be opened?	W	When should the survey be closed?	

data provided by OIPRA will be distributed to you for review and approval. Once the final draft has been completed the survey will be returned to you in your requested format. If you wish for the results to be distributed to anyone besides yourself, please indicate their name, department and email below.	

The OIPRA office requires a minimum of 5 business days for completion of survey creation. Analysis of the

900 Chicon Ave, AV Alumni Hall, Room 310 Austin, TX 78702 Or Email ttjackson@htu.edu Phone: 512-505-3020

You will be contacted by a member of the OIPRA staff in the next few days to further discuss your survey request.