THE UNIVERSITY OF **CHICAGO** | **Data Stewardship Council**

DATA SHARING REQUEST FORM
ALUMNI/DONOR DATA

For final approval, email completed form to ARD Development and Systems Help (dashard@uchicago.edu) and cc: DataUsageRequest@lists.uchicago.edu

I.   REQUESTOR/RECIPIENT

Requestor Name		**Unit**	
Phone Number		**Email**	
Date Submitted		**Date Needed**	

Recipient Name		**Receiver Org**	
Phone Number		**Email**	

II.   INFORMATION ABOUT THE REQUESTED ALUMNI/DONOR DATA

1. Do you need this data to be pulled for you?

    Yes   No

2. Provide a brief overview of this request, with a general description of what data is needed, and for what business purposes.

3. Provide details of who will use this data. Who will have access to view and manage the data? How will the recipients/custodians of the data (hereby referred to as the "Recipients") securely store this data? What access controls and/or security permissions will be in place to insure compliance with data security guidelines? Please confirm that this data will not be used outside of US borders.

4. Is the data being provided to a third party? If so, does the University have a current contract/agreement with that party under which data protection provisions have been outlined?

5. Describe the selection criteria and any filtering conditions for the data (e.g. all current records with certain specific selection rules.). Provide examples if possible.

6. Is historical data required? If so, describe the date range that is being requested.

7. The standard request is for sharing the data once. If multiple instances of the data are being requested, please describe the frequency of the requests.

8. Provide any additional information that is relevant such as resources required, specific business rules, caveats or specific technology needs.

III. REQUESTED DATA FIELDS

Important: If any student data is requested**, the FERPA flag must be included** as one of the data fields.

	Data Field	Description and Notes
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DATA SHARING AGREEMENT — TERMS AND CONDITIONS

Data Stewardship: The Requestors, Recipients, and all persons who handle the data received in this data extract accept responsibility for its safe usage and storage. The data is meant only for the purpose described in this document and is not to be transferred or shared with others. The Recipients agree to keep the data secure and confidential, and to abide by any policy or regulation associated with the type of data that will be sent.

☐ I agree to the above terms and conditions

Social Security Number usage: I agree to abide by the policies described in:
https://itservices.uchicago.edu/policies/policy-digital-use-social-security-number

☐ I agree to the above terms and conditions

NOTE: If SSNs are included, a signature by a University Officer is required.

Submitted By	Signature:		
	Print Name:	**Date**	
Approved By: (Alumni/Donor Data Steward)	Signature:		
	Print Name:	**Date**	