

Appendix B: LEADS Data Request Form

Type of Request - please check one:
Quick Search Requests
Non-Research Information Request
Research Proposal Request

Please mail the completed request form and any attachments to the following address:

LEADS Committee
Attn: Gregg Margolis
P.O. Box 29233
Columbus, Ohio 43229

Name of Requestor: _____

Affiliation/Institution: _____

Contact Telephone #: _____

Contact Fax #: _____

E-Mail Address: _____

Question to be answered by data: _____

Specific data to be collected (attach an additional sheet of paper if necessary): _____

Date of request: _____

Intended use of data/ Where are data to be submitted?: _____

Approved

Denied

Explanation: _____

Gregg Margolis
LEADS Project Coordinator

Date _____