

**AMERICAN SAMOA DEPARTMENT OF EDUCATION  
DATA REQUEST FORM**

**Requestor Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Contact Information: Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

1. What is the purpose of the data request?

\_\_\_\_\_

2. What specific type of data is requested to accomplish the purpose?

\_\_\_\_\_

3. The data requested includes which school years?

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

4. How will the data be safeguarded?

\_\_\_\_\_

*In consideration of any data received from the American Samoa Department of Education, I agree and promise that no attempt will be made by me or any individual(s) under my supervision to use the data for any purpose not specified in my data request.*

*Signature:* \_\_\_\_\_

*Date:* \_\_\_\_\_

