

Data Request Form

Request date:

By completing this form, I am making an official request for data under the Minnesota Government Data Practices Act ("MGDPA"), Chapter 13 of the Minnesota Statutes.

Requestor:

- I am a **member of the public** seeking information that is classified as public and is not about me.
 - Does not require proof of identity
- I am the **data subject**. I am requesting information about myself or that identifies me.
 - Requires proof of identity. (See [Identity Verification Guide](http://www.sourcewelltech.org) available at <http://www.sourcewelltech.org> for qualifying documents)
- I am the **parent or legal guardian of a minor child** seeking information about my child/student.
 - Requires proof of identity. (See [Identity Verification Guide](http://www.sourcewelltech.org) available at <http://www.sourcewelltech.org> for qualifying documents)
- I am the **legal guardian of an individual adult** seeking information about the individual.
 - Requires proof of identity. (See [Identity Verification Guide](http://www.sourcewelltech.org) available at <http://www.sourcewelltech.org> for qualifying documents)

I am requesting access to data in the following way:

I understand that depending on the nature of my request and how I would like to receive the data, charges may apply. (See Sourcewell's [MGDPA Policy & Procedure](#) for details)

- Inspection - I would like to set up a time to only look at the data.
- Copies - I would like to receive a copy of the data in the following manner as available:
 - I prefer electronic (.pdf) copies if available
 - Email address required
 - I prefer paper copies
 - Mailing address or fax required unless picking up
- Both inspection and copies - I would like to look at the data first and then decide if I need a copy.

The data I am requesting (include explanation if you are requesting summary data):

Describe the data you are requesting as specifically as possible.

Options to submit this form:

1. Email this form to the Data Practices Contacts identified in Sourcewell’s MGDPA Policy & Procedure.
2. Print this form and mail it, or deliver it to the Data Practices Contacts identified in Sourcewell’s MGDPA Policy & Procedure.

If you are required to identify your identity, you must provide the verification documents along with this form (or other writing) to the Data Practices Contacts.

Contact information (optional)*

Name:

phone number:

email address:

street address:

* You are not obligated to provide any contact information unless you are required to verify your identity (See page 1 under *Requestor*). However, if you want us to mail/email you copies of data, we will need some type of contact information. We also need contact information if we do not understand your request. We will not work on your request until we can clarify it with you.