

DATA REQUEST

Ohio Department of Health

Bureau for Maternal and Child Health

Assessment and Planning

Instructions

Please provide as detailed information as you possibly can. A response to all items/questions is necessary. Not including full and clear details with the initial request creates delays in fulfilling the data request. The applicable program manager should send the completed data request form to Amy.Davis@odh.ohio.gov.

Contact Information

Request made by (include title and organization): Name
Primary contact for clarifications: <input type="checkbox"/> Made By <input type="checkbox"/> Other: Name(s)
Primary contact phone number: Phone Number
Primary contact email address: Email Address
Other email address(es) to include in clarifications/resulting product: Email Address
Deadline date to receive the data*: Date

Details of Request

1. What program are you interested in? Please mark **at least one** of the boxes listed below.

<input type="checkbox"/>	Help Me Grow Home Visiting (HMGHV)
<input type="checkbox"/>	Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
<input type="checkbox"/>	Other (including subset(s) of a program listed above): Describe

2. What year are you interested in? Please mark **only one** of the boxes listed below.

<input type="checkbox"/>	Calendar Year(s): Which one(s)?
<input type="checkbox"/>	State Fiscal Year(s): Which one(s)?
<input type="checkbox"/>	Other: Date to Date

3. 'Geographic' Area Requested – Please mark **at least one** of the boxes listed below.

<input type="checkbox"/>	Statewide
<input type="checkbox"/>	County(ies): Describe
<input type="checkbox"/>	Region(s): Describe
<input type="checkbox"/>	Contractor(s): Describe

4. Provide the question(s) the resulting product should answer/address.

Describe

5. Provide a description of the requested data/analysis(es), including any specific indicators/variables.

Describe

6. Explain how you will use the data, including the format and any/all intended audiences the resulting product may be shared with.

Describe
