



## REPORT REQUEST | OFFICE OF THE REGISTRAR

1200 Murchison Rd., Fayetteville, NC 28301, Lilly Bldg, Room 300  
[yguy@uncfsu.edu](mailto:yguy@uncfsu.edu) | (910) 672-1719

**Department:** \_\_\_\_\_

**Contact person(s):** \_\_\_\_\_

**E-mail address(es):** \_\_\_\_\_

**Phone number(s):** \_\_\_\_\_

**Report title:** \_\_\_\_\_

**Report description:**

Please include each data field requested (i.e., Banner ID, student name, advisor name, major, minor)

**Submission date:** \_\_\_\_\_

PLEASE NOTE that the Office of the Registrar

- will not accept as soon as possible requests;
- must have at least 72 hours notice of the report request; and
- may complete a report within 7-10 business days, but not guaranteed based on the needs of the office.

**You will receive confirmation e-mail once the request is processed.**