

Data Request Received \_\_\_\_\_

**FISK UNIVERSITY**  
**BULLETIN INFORMATION REQUEST FORM**

Bulletin Year (Date of Bulletin) \_\_\_\_\_

Dates You Attended Fisk University \_\_\_\_\_

Name(s) used during your Fisk University enrollment \_\_\_\_\_

Information Requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Purpose of This Request: \_\_\_\_\_