



EAST TENNESSEE STATE  
UNIVERSITY

### External Requests for Advancement Data

Responsible Official: Vice President for  
University Advancement

Responsible Office: University Advancement

#### Policy Purpose

This policy serves to direct ETSU departments and divisions as to the approvals necessary for external entities to request contact/other information from University Advancement.

#### Policy Statement

University Advancement maintains contact and other personal information on the institution's constituents for the benefit of ETSU, but the division must also protect the use of this information for these constituents. To this end, all requests for Advancement information for use outside of the Advancement division must be approved by those listed on the attached request form.

#### Definitions

Constituent – any alumnus, parent, friend, or organization in the Advancement database.

#### History

Effective Date: 02/07/2018

Revision Date:

#### Procedure (s)

##### **Attachments:**

Advancement Data Request Approval Form

##### **Reference:**

Advancement Ethics Policy for safeguarding sensitive donor information

#### **I. Responsibilities:**

- A. Requestor will complete the form with adequate detail to describe the intended use of the information.
- B. Advancement Services will make sure the request is understood and all necessary information is included in the form at the beginning of the routing process.
- C. At least three signatures should be obtained for all requests. Each signature represents that person's agreement that the information will be used for the sole benefit of ETSU as outlined in the request.

- D. Updates received by the requestor will be shared with Advancement for the improvement of the institution's collective information.

**II. Process:**

- A. Complete the attached form
- B. Route for signatures
- C. Requested list will be provided
- D. Forward updates to Advancement Services

Related Form(s)

N/A

Scope and Applicability

	Governance	
	Academic	
	Students	
	Employment	
	Information Technology	
	Health and Safety	
	Business and Finance	
	Operations and Facilities	
	Communications & Marketing	
X	Advancement	

## Attachment – Sample

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### Request to Receive Advancement Contact Information

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

Department & Individual Requesting Data: \_\_\_\_\_

*(Please include phone and email address for questions)*

Detailed Purpose of Request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specific Data Requested: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Approval Routing (signatures indicate approval is necessary, unless otherwise noted)*

\_\_\_\_\_

Advancement Services Reporting Representative Name and Signature

Date

Unit Development Officer (if applicable) Name and Signature

Date

Chair/Director (if applicable) Name and Signature

Date

Dean/Vice President (if applicable) Name and Signature

Date

Vice President for Advancement Name and Signature

Date

Forward completed/signed form to University Advancement Services, Burgin Dossett Hall, Room 302, 9-5722.  
January 2018