## HRIS QUERY/REPORT REQUEST FORM

Requester Name: Department:				
Date Requested: Date Required:				
Please describe purpose of request:	selections below to indicate t	he criteria for the reque	act.	
Employee Status:	Employee Type:	Employee Class:	Report's Effective Date:	
Active On Leave Work Break Suspended Terminated Retired Deceased	Hourly Student Employees Faculty Staff Task	Regular Non-Employees	As of: From to Other specific date(s):	
Organization(s):	List Departments Rec	quired:		
UNT-Dallas UNT-Denton System	All UNT-Dallas All UNT-Denton All UNT-System Specific Department(s)			
Please indicate the	information to be displayed:			
Please indicate any	special formatting needs and	d/or the sort order of th	e request:	
		Requester's Prio	rity	
Approved by:			High (due in 3 working days) Medium (due in 5 working days)	
Date:		Low (due	Low (due in 10 working days	