



## Data Request Form

560 N. Nimitz Hwy, Suite 218  
Honolulu, Hawaii 96815  
Phone: 808-839-1789  
Fax: 808-839-1799

Date of Request: \_\_\_\_\_ Date Information Needed By: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

- Purpose of Data Request:
- Marketing
  - Professional Development
  - Referrals
  - Statistical Data

- Please indicate your preferred method of correspondence:
- Phone
  - Email
  - Mail
  - Fax

Please describe the type of data/statistics you are requesting. (Example: seeking the number of providers who care for infants, number of providers in a specific geographic area, etc.)

- Geographic Area Needed:
- Entire State of Hawaii
  - Oahu
  - Maui
  - Molokai
  - Lanai
  - Kauai
  - East Hawaii
  - West Hawaii

Specific Cities (Please list by zip code)

_____	_____
_____	_____
_____	_____
_____	_____

Briefly describe the purpose for this request. Please include why you are requesting the information and how you plan to use the information.

*Child care providers are licensed by the State Department of Human Services and are not employees, subcontractors, agents or licensees of PATCH. I understand that the list of licensed providers continually changes. PATCH makes no warranties expressed or implied about the quality of childcare they offer. I understand that if this request is fulfilled, I will only have permission to use the information in the manner I have described. I understand that if the information is used for any other purpose, PATCH reserves the right to deny further requests. If statistical information is used in a published document, PATCH will be credited in the document. PATCH also reserves the right to review published documents before it is disseminated to the public.*

Authorized Signature: \_\_\_\_\_

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

Please send form to [aarce@patch-hi.org](mailto:aarce@patch-hi.org)

PATCH thanks the State Department of Human Services-Benefit, Employment and Support Services Division for its support.