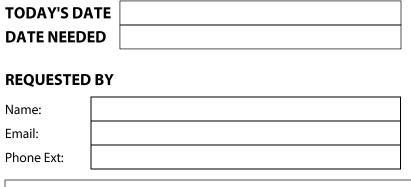
VIPP Data Project Request Form

Please complete the following information. When complete, click the "print form" button, save as a PDF in your print screen, and send your request to Gary Mower at gdmower@utah.gov.





288 North 1460 West / Box 142106

Salt Lake City, UT 84114-2106 Phone: 801-538-6864

Fax: 801-538-9034 www.health.utah.gov/vipp/

Internal Use Only

Date Received:	
Date Completed:	

/hat do you /ant to know?		
GE GROUP	PRODUCT	TOPIC AREA
 Kids (0-14) Teens & Young Adults (15-24) Adults (25-64) Older Adults (65+) EAR(S) Single Specify: Grouped Specify: ease explain your request in the second secon	Data Request Only Fact Sheet Talking Points Other Please specify:	☐ Child Maltreatment ☐ Domestic Violence ☐ Falls ☐ Homicide ☐ Motor Vehicle Crashes ☐ Prescription Drug Overdose ☐ Rape ☐ Student Injury ☐ Suicide ☐ TBI & SCI ☐ Other Please specify: