

FACULTY QUESTIONNAIRE - COLLEGE OF NURSING

Name: _____

Phone: _____

Email: _____

Office: _____

I. Communication

a. Do you prefer email or phone: _____

b. best days and times to talk: _____

II. Research Focus

III. Research Goals

This will help me identify where you are in your research career. Please include dates(example: I would like to submit 3 proposals in the Spring of 2008)

IV. Support

Please identify any additional support needed (example: help with research funding opportunities, uploading documents into funding agency websites, etc.)

Please complete this form and return it to me via email or campus mail. I look forward to working with you!

Thanks,
Jana Savanapridi
Contracts and Grants Coordinator
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and Business Administration

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