

College of Nursing

Request for Research Space

1. Please attach a copy of the research project abstract and budget

2. Grant Type:

3. Grant funding period:

4. Indicate the head count (HC) and full-time equivalency (FTE - e.g., half-time staff member = .50 FTE) for the research staff you employ, by job description:

			How many will conduct majority of work:	How many on campus staff:
	Headcount	On-Campus	Off-Campus	Can share space but need access to private space
Undergraduate RAs				
GAs				
Project Mgr.				
Data Collectors				
Research Nurse				
Secretarial				
Programmers				
Stats Asst.				
Project Coord.				
Pre-Doc fellow				
Post-Doc fellow				
Other: <input type="text"/>				
Total				

5. For employees identified in question 6. as needing private workspace, please indicate why:

For privacy of data collection, such as doing individual group interviews, etc.

Other (specify):

6. Indicate the approximate amount of storage space you will need for your research projects. Do not include staff work space or other space needs for this question. Use the reference point of a 4-drawer vertical file cabinet (approximately 20 cubic feet) to describe your storage needs:

cubic feet storage space needed currently

7. For the storage space needs you indicated for question 8., how much of this storage footage must be immediately available to your research team? Indicate the approximate cubic footage for each option below:

- Secured storage space within or adjacent to research space
- On-site, but not adjacent, secure storage location
- Off-site, secure storage location

8. Check all below that describe the methods(s) of research data collection that will be conducted **on-campus** for your project(s):

- In-person interviews with individuals
- Telephone interviews with individuals
- Secondary analysis of existing records; e.g., data bases, medical records, etc.
- In-person interviews with small groups; e.g., dyads, families, etc.
- Focus group interviews
- Web-based data collection (e.g., surveys)
- Automated telephone screening
- Other (specify):

9. What needs do you have for conducting meetings on-campus? How frequently and how many people?

10. How often do you receive visitors related to your work activities? What type? Are there any special needs that need to be considered in relation to your visitors?

11. Additional information. Please use this space to provide information regarding preferences (e.g., buildings proximity to academic office, proximity to collaborators, etc) and/or other factors that should be considered when assigning space to this research project:

Submit completed forms to Dr. Terry Viau, Associate Dean for Support Services