



**ASIAN HEALTH SERVICES
COLLABORATION QUESTIONNAIRE**

Collaborating Agency: Contact Person: Phone #: _____ E-Mail: _____
Project Title and Description:
Brief description of goals, objectives and activities:
Funding Source, if any: If this is in response to a funding opportunity, please provide the following information: Funding Amount: _____ Funding Period: _____ Letter of Intent Deadline: _____ Proposal Deadline: _____
List any past collaboration with AHS, including key AHS staff involved:
Collaborating AHS program/department for this project:
How does this collaboration fit into the goals of AHS? 1. Improve the health and well-being of Asian & Pacific Islanders ___Yes ___No (Please explain) 2. Does it build either AHS or community capacity? ___Yes ___No (Please explain)
AHS Role: <ul style="list-style-type: none">• What are the duties/ responsibilities expected from AHS? • What are the expected monetary or in-kind contributions from AHS? • What kind of data or information is needed from AHS, if any?
Collaborating Agency Role: <ul style="list-style-type: none">• What are the monetary and/or in-kind contributions from the collaborating agency?
Collaborative Arrangements: <ul style="list-style-type: none">• Will AHS be a co-director of the project? ___Yes ___No If not, please explain reason(s): _____ • Will the decisions be made jointly in the following areas?<ul style="list-style-type: none"><input type="checkbox"/> Project development<input type="checkbox"/> Project implementation<input type="checkbox"/> Budget<input type="checkbox"/> Dissemination • Is the grant amount, if any, divided evenly among the collaborators? ___Yes ___No

If no, what portion of the grant request is for the community (including AHS)? ___%

- How will disagreements be handled?

Benefits to the Community:

- Please specify plan for broader community involvement in all phases of the project, if any.
- Please specify plans for presentation of the project outcome to the community.
- Please specify how this project would contribute to community capacity-building, empowerment or research gaps?

For Internal Use

Benefit of the project to the community (1 = low, 10 = high) _____

Impact on AHS operations (1 = high, 10 = low) _____

***Note:** After it is completed by a researcher or research team, this form is scored and reviewed by a committee at Asian Health Services. Committee members include Asian Health Services Medical Director, Associate Director, Community Services Director and other AHS providers.*