ASIAN HEALTH SERVICES
RESEARCH COLLABORATION QUESTIONNAIRE

Collaborating Agency: **Contact Person**:   **Phone #**:   **E-Mail**:
Project Title:
Type of Study: ❑ Needs Assessment   ❑ Analysis of existing data   ❑ Data collection   ❑ Intervention
Brief description of project goals, objectives and activities:
Funding Source:
Total Funding Amount: **Funding Amount requested**:   **Funding Period**:   **Letter of Intent Deadline**:   **Proposal Deadline**:
Does the researcher have previous experience with Community-Based Participatory Research? ___Yes ___No (If Yes, please describe the experience.)   **Name of the last community-based partner**:   **Contact person and information**:
How does this project fit into the goals of AHS?   1. Increase the knowledge of API communities' health issues ___Yes ___No   2. Research that is beneficial to the API population in the short and long run? ___Yes ___No (Please explain)   3. Does it build either AHS or community capacity? ___Yes ___No (Please explain)
List any past collaboration with AHS, including key AHS staff involved:
Collaborating AHS program/department for this project:
Amount/type of in-kind contribution sought from AHS:
AHS Staff and Role: • Is an AHS staff either a PI or a co-PI? ___Yes ___No (If not, please explain.)   • What are the duties/ responsibilities expected from AHS?   • What kind of data or information is needed from AHS, if any?

Collaborative Arrangements:
- Will AHS be a co-owner of the data? ___Yes ___No

If not, please explain reason(s):

- Will AHS review any publication submitted? ___Yes ___No

If not, please explain reason(s):

- Will AHS be co-authors and co-presenters during dissemination? ___Yes ___No

If not, please explain reason(s):

- Is the grant amount divided evenly among researchers and community? ___Yes ___No

If no, what portion of the grant request is for the community (including AHS)? ___%
- Does the funding entity allow separate grants for each collaborating agency? ___Yes ___No

- Will the decisions be made jointly in the following areas?
  - ❑ Design/Methodology
  - ❑ Staffing
  - ❑ Budget
  - ❑ Implementation
  - ❑ Analysis
  - ❑ Dissemination
- How disagreements be handled?

Benefits to the Community:
- Please specify plan for broader community involvement in all phases of the research project

- Please specify plans for presentation of the research results to the community

- Please specify how this project would contribute to community capacity-building, empowerment or research gaps?

Are there provisions for HIPAA Compliance? ___Yes ___No
Are there provisions for patient safeguards? ___Yes ___No

Which IRB would you need approval from?
Is AHS required to get approval from any IRB or be involved in the IRB process?

For Internal Use

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

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