



**Industry University Cooperative Research Centers
IAB Member Pulse Survey**

Center Name: _____

Q1. Please rate your level of satisfaction with the following:

	Not Satisfied (1)	Slightly Satisfied (2)	Somewhat Satisfied (3)	Quite Satisfied (4)	Very Satisfied (5)
Center Research	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Center Administration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Center Meetings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q2. Has your organization experienced any significant benefits since the last meeting (e.g., networking, research and development, technology translation, or commercialization benefits)?

Q3a. How can the Center improve? Please mark all areas that need improvement.

- | | | |
|--|--|---|
| <input type="checkbox"/> a. Planning the Research Program | <input type="checkbox"/> e. Dissemination of Results via Publications | <input type="checkbox"/> i. IAB Meetings |
| <input type="checkbox"/> b. Project Selection | <input type="checkbox"/> f. Technology Transfer | <input type="checkbox"/> j. Communication |
| <input type="checkbox"/> c. Project Development & Management | <input type="checkbox"/> g. Intellectual Property Management | <input type="checkbox"/> k. Center Personnel |
| <input type="checkbox"/> d. Project Results Reporting | <input type="checkbox"/> h. Fundraising and Recruitment of New Members | <input type="checkbox"/> l. Other (specify) _____ |

Q3b. Do you have any comments for the Center director(s) about how the Center can improve, or areas of excellence that should be maintained? Please identify by letter if listed above, and comment.

Q4. Do you have any comments about the Center you would like shared directly with NSF? Your response to this question will only be shared *confidentially* with NSF program directors.

Q5. Will your organization renew its membership next year?

Definitely not (1)	Probably not (2)	Uncertain (3)	Probably yes (4)	Definitely yes (5)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Organization Name: _____

How many years has your organization been a member in this center? _____

What is your organization type?

For Profit-Large (> 500 Employees) (1)	For Profit-Small (11-500 Employees) (2)	For Profit-Micro (<10 Employees) (3)	Government (Fed/State/Local) (4)	Other (5)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thank You!