

# Nursing Education Programs Market Assessment

\* Indicates required question

1. Company Name \*

2. What type of institution best describes your organization? Type (select all that match) \*

Check all that apply.

- ☐ Public College or University (Non-Profit)
- ☐ Private University (Non-Profit)
- ☐ Technical or Vocational School (LPN/CNA certificates)
- ☐ Proprietary Nursing School (For-Profit)

3. Is company profile and basic metrics available in a third-party business intelligence database \*

Mark only one oval.

- ☐ Yes Skip to question 4
- ☐ No Skip to question 8

Skip to question 9

## Company Profile

4. Year founded

If unknown, please enter N/A

5. Estimated Global Institution Earnings

If unknown, choose Revenue Information Not Available

Mark only one oval.

- ☐ Under 1M
- ☐ 1M - 50M
- ☐ 51M - 100M
- ☐ 100M - 500M
- ☐ 500M - 1B
- ☐ 1B - 500B
- ☐ 501B+
- ☐ Revenue Information Not Available

6. Estimated enrollment in nursing education programs

Enter "0" if unknown

7. Website

If unknown, please enter N/A

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Parent Company Headquarters Location (if applicable)

8. Corporate Headquarters

*Mark only one oval.*

☐ Florida-based    *Skip to question 17*

☐ Outside Miami or Out-of-State

☐ N/A    *Skip to question 17*

*Skip to question 9*

Contact Information

9. Address \*

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10. City \*

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11. State \*

 Dropdown*Mark only one oval.*

- ☐ AL - Alabama
- ☐ AK - Alaska
- ☐ AZ - Arizona
- ☐ AR - Arkansas
- ☐ CA - California
- ☐ CO - Colorado
- ☐ CT - Connecticut
- ☐ DE - Delaware
- ☐ DC - District of Columbia
- ☐ FL - Florida
- ☐ GA - Georgia
- ☐ HI - Hawaii
- ☐ ID - Idaho
- ☐ IL - Illinois
- ☐ IN - Indiana
- ☐ IA - Iowa
- ☐ KS - Kansas
- ☐ KY - Kentucky
- ☐ LA - Louisiana
- ☐ ME - Maine
- ☐ MD - Maryland
- ☐ MA - Massachusetts
- ☐ MI - Michigan
- ☐ MN - Minnesota
- ☐ MS - Mississippi
- ☐ MO - Missouri
- ☐ MT - Montana
- ☐ NE - Nebraska
- ☐ NV - Nevada
- ☐ NH - New Hampshire
- ☐ NJ - New Jersey
- ☐ NM - New Mexico
- ☐ NY - New York
- ☐ NC - North Carolina
- ☐ ND - North Dakota
- ☐ OH - Ohio
- ☐ OK - Oklahoma
- ☐ OR - Oregon
- ☐ PA - Pennsylvania
- ☐ Rhode Island - RI
- ☐ South Carolina - SC
- ☐ SD - South Dakota
- ☐ TN - Tennessee
- ☐ TX - Texas

- ☐ UT - Utah
- ☐ VT - Vermont
- ☐ VA - Virginia
- ☐ WA - Washington
- ☐ WV - West Virginia
- ☐ WI - Wisconsin
- ☐ WY - Wyoming

12. Zip Code \*

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13. Main Number

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14. Estimated Global Earnings

If unknown, choose Revenue Not Available

*Mark only one oval.*

- ☐ Under 1M
- ☐ 1M - 5M
- ☐ 5M - 25M
- ☐ 25M - 100M
- ☐ 100M - 500M
- ☐ 500M - 1B
- ☐ Over 1B
- ☐ Not available at this time

15. Employee Count

*Mark only one oval.*

- ☐ 1-100
- ☐ 101-500
- ☐ 501-1500
- ☐ 1501+
- ☐ Not available at this time

16. Corporate Office Facility Size (sq. ft)

If unknown, please enter 0

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Institution Headquarters

17. Street Address \*

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18. Zip Code \*

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19. Estimated **Employee Count**

*Mark only one oval.*

- ☐ 1-100
- ☐ 101-500
- ☐ 501-1500
- ☐ 1501+
- ☐ Not available at this time

20. Number of **Students** managed \*

*Mark only one oval.*

- ☐ 1-250     *Skip to question 21*
- ☐ 251- 500     *Skip to question 22*
- ☐ 501 - 1000     *Skip to question 23*
- ☐ 1001+     *Skip to question 24*
- ☐ Information unavailable at this time     *Skip to question 25*

#### Tier 1 Testing

Includes foundational services (minimum est.):

21. Which of the following services might your company need?

*Mark only one oval.*

- ☐ <500: DA     *Skip to question 25*
- ☐ <575: DA, AT     *Skip to question 25*
- ☐ <725: DA, AT, BC     *Skip to question 25*
- ☐ <785: DA, AT, BC, FP     *Skip to question 25*

*Skip to question 25*

Tier 2 Testing

Slightly more specialized services (minimum est.):

22. Which of the following services might your company need?

Mark only one oval.

- ☐ <725: DA, AT, BC      Skip to question 25
- ☐ <785: DA, AT, BC, FP      Skip to question 25
- ☐ <985: DA, AT, BC, FP, PE      Skip to question 25
- ☐ <1,485: DA, AT, BC, FP, PE, DNA      Skip to question 25

Skip to question 25

Tier 3 Testing

Proactive and specialized services (minimum est.):

23. Which of the following services might your company need?

Mark only one oval.

- ☐ <985: DA, AT, BC, FP, PE      Skip to question 25
- ☐ <1,485: DA, AT, BC, FP, PE, DNA      Skip to question 25
- ☐ <2000: DA, AT, BC, FP, PE, DNA, Custom/Specialized Testing Programs (bespoke solutions and svcs beyond ones listed)  
Skip to question 25
- ☐ <2,5K: DA, AT, BC, FP, PE, DNA, Custom/Specialized Testing Programs (bespoke solutions and svcs beyond ones listed), Consulting  
(Strategic Partnership)      Skip to question 25

Skip to question 25

Tier 4 Testing

Very high volume needs and comprehensive, integrated solutions (minimum est.):

24. Which of the following services might your company need?

Mark only one oval.

- ☐ <2000: DA, AT, BC, FP, PE, DNA, Custom/Specialized Testing Programs (bespoke solutions and svcs beyond ones listed)  
*Skip to question 25*
- ☐ <2500: DA, AT, BC, FP, PE, DNA, Custom/Specialized Testing Programs (bespoke solutions and svcs beyond ones listed), Consulting (Strategic Partnership) *Skip to question 25*
- ☐ <3000: DA, AT, BC, FP, PE, DNA, Custom/Specialized Testing Programs (bespoke solutions and svcs beyond ones listed), Consulting (Strategic Partnership), On-site Testing/Collection Services (Allowing convenience for enterprise clients) *Skip to question 25*
- ☐ <4000: DA, AT, BC, FP, PE, DNA, Custom/Specialized Testing Programs (bespoke solutions and svcs beyond ones listed), Consulting (Strategic Partnership), On-site Testing/Collection Services (Allowing convenience for enterprise clients), Integrated Solutions/Platform Access (tech solutions for managing results) *Skip to question 25*

*Skip to question 25*

Primary Engagement Contact

If unavailable, submit form

25. Contact Identified \*

Mark only one oval.

- ☐ Yes *Skip to question 26*
- ☐ No

Primary Contact Details

Best contact identified for company engagement

26. Contact 1: First Name \*

27. Contact 1: Last Name \*

28. Contact 1: Title

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29. Contact 1: Direct Phone Number \*

Use Main Number if direct line is unavailable

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30. Contact 1: Email Address

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31. Additional Team Contact \*

*Mark only one oval.*

☐ Yes    *Skip to question 32*

☐ No

#### Secondary Team Contact

Best secondary contact identified for company engagement

32. Contact 2: First Name

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33. Contact 2: Last Name

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34. Contact 2: Title

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35. Contact 2: Direct Phone Number

Use Main Number if direct line is unavailable

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36. Contact 2: Email Address

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## 37. Additional Team Contact

*Mark only one oval.*

☐ Yes    *Skip to question 38*

☐ No

## 3rd Team Contact

Best third contact identified for company engagement

## 38. Contact 3: First Name

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## 39. Contact 3: Last Name

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## 40. Contact 3: Title

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## 41. Contact 3: Direct Phone Number

Use Main Number if direct line is unavailable

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## 42. Contact 3: Email Address

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## 43. Additional Team Contact

*Mark only one oval.*

☐ Yes    *Skip to question 44*

☐ No

## 4th Team Contact

Best 4th contact identified for company engagement

44. Contact 4: First Name

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45. Contact 4: Last Name

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46. Contact 4: Title

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47. Contact 4: Direct Phone Number

Use Main Number if direct line is unavailable

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48. Contact 4: Email Address

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