Focusing on engagement is a critical component of the new 2012-2017 KSU strategic plan. In addition, documenting existing efforts is vital to meeting the university's current goals and objectives.

Engagement is also central to KSU's plan to seek the Carnegie designation as an "engaged campus" and is paramount to ensuring resources are appropriately allocated to support, promote, and enhance engagement moving forward.

We are asking for your help in identifying these activities so that we can assist with the broader goal of more closely linking the university community to the community at large.

This survey should take no more than 10 minutes to complete.

The Engaged KSU team adopted the following definition of engagement:

“Engage KSU promotes collaboration between Kennesaw State University and its larger communities (local, regional/state, national, global) for the mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity."

In an effort to help support the ongoing engaged activities we want to build a comprehensive listing of the current efforts already underway on campus.

We are asking you to identify your top three engaged projects or activities that you have been involved with over the course of the past year and to share them with us. We are asking just a few questions related to each activity.

Before continuing, please read and agree with the following statements.

I agree to participate in this study, and I affirm that I am 18 years of age or older. The purpose of this research has been explained and my participation is voluntary. I have the right to stop participation at any time without penalty.

I understand that the intent of this research is to document existing efforts by KSU Faculty that promote collaboration between the university and its larger communities. Therefore, my name and the information I provide herein, may be personally identifiable. I am agreeing to participate in this research project.

I am at least 18 years old.
I agree to participate.
Please verify the following information:
Name: 
Title: 
College: 
Department: 

Is this information correct?
☑ Yes
☑ No

Please provide the correct information. You may only provide what needs to be corrected.
Name: ____________________
Title: ____________________
College: ____________________
Department: ____________________

We are interested in learning about activities and projects that have been active over the course of the past year. For each project, we are asking for a short description and information about the amount of time associated with your efforts.

Again, we are asking you to identify your top three engaged activities or projects. You will be given an option of listing additional projects and activities after providing information regarding this one.

Project/Activity Title: ____________________

You may either type the date directly into the box below, or click on the red calendar icon.

Begin Date: ____________________
End Date: ____________________ ☑ Project/Activity is ongoing

Please provide a short description of the activity or project. You may simply provide a citation or copy/paste from your vita.
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
About how much time do you spend on this activity or project?

Number of hours ______

Number per... Week Month Semester
Number of hours ☒ ☒ ☒

Please provide a list of the external partners involved. For example, a corporation or a non-profit organization.

Organization 1 ________________
Organization 2 ________________
Organization 3 ________________

Are there any other departments or colleges at KSU involved in this activity or project?

☒ Yes
☒ No

Please list the other departments or colleges at KSU involved.

Dept./College 1 ________________
Dept./College 2 ________________
Dept./College 3 ________________

(FACULTY ONLY) - Does this activity or project involve...

~ check all that apply ~
☒ Research and Creative Activity
☒ Teaching
☒ Service
☒ None
☒ Other ________________

(FACULTY ONLY) - Does this activity or project involve any external grant funding?

☒ Yes
☒ No

(FACULTY ONLY) - How much external grant funding do you receive for this activity or project?

   Dollar amount: _____

Would you like to add another project or activity?

☒ Yes
☒ No
Project/Activity Title: ____________________

You may either type the date directly into the box below, or click on the red calendar icon.

Begin Date: ____________________
End Date: ____________________  ○ Project/Activity is ongoing

Please provide a short description of the activity or project. You may simply provide a citation or copy/paste from your vita.
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

About how much time do you spend on this activity or project?

Number of hours  ____

Number per... Week  Month  Semester
Number of hours  ○  ○  ○

Please provide a list of the external partners involved. For example a corporation or a non-profit organization.
  Organization 1 _________________
  Organization 2 _________________
  Organization 3 _________________

Are there any other departments or colleges at KSU involved in this activity or project?
  ○ Yes
  ○ No

Please list the other departments or colleges at KSU involved.
  Dept./College 1 _________________
  Dept./College 2 _________________
  Dept./College 3 _________________
(FACULTY ONLY) - Does this activity or project involve...

~ check all that apply ~
- Research and Creative Activity
- Teaching
- Service
- None
- Other ____________________

(FACULTY ONLY) - Does this activity or project involve any external grant funding?
- Yes
- No

(FACULTY ONLY) - How much external grant funding do you receive for this activity or project?
- Dollar amount: _____

Would you like to add a 3rd project or activity?
- Yes
- No
Project/Activity Title: ____________________

You may either type the date directly into the box below, or click on the red calendar icon.

Begin Date: ____________________
End Date: ____________________  ☐ Project/Activity is ongoing

Please provide a short description of the activity or project. You may simply provide a citation or copy/paste from your vita.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

About how much time do you spend on this activity or project?

Number of hours ______

Number per... Week Month Semester
Number of hours ☐ ☐ ☐

Please provide a list of the external partners involved. For example a corporation or a non-profit organization.
Organization 1 ____________________
Organization 2 ____________________
Organization 3 ____________________

Are there any other departments or colleges at KSU involved in this activity or project?
☐ Yes  ☐ No

Please list the other departments or colleges at KSU involved.
Dept./College 1 ____________________
Dept./College 2 ____________________
Dept./College 3 ____________________

(FACULTY ONLY) - Does this activity or project involve...

~ check all that apply ~
☒ Research and Creative Activity
☒ Teaching
☒ Service
☒ None
☒ Other ____________________
(FACULTY ONLY) - Does this activity or project involve any external grant funding?
  ○ Yes
  ○ No

(FACULTY ONLY) - How much external grant funding do you receive for this activity or project?
  Dollar amount: ____

Would like to become a part of the Engage KSU working group?

*If you choose "yes," you will receive an email from the Engage KSU Leadership Team, within the next week.*
  ○ Yes
  ○ No

Finally, thinking about this survey, how can Engage KSU provide better support for your work?

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________