



Default Question Block

Q1. Dean / Chief Nursing Administrator

The following survey pertains to the Dean or Chief Nursing Administrator at your institution.

For purposes of uniformity, the term "Dean" refers to the person in charge of the school/college/department/program/division of nursing.

If this person holds the title of Acting or Interim Dean/Chair/Director/Head/Coordinator, that individual should be entered in the Faculty section with the Administrative Title of "Interim Dean," and also recorded within this survey after the Interim or Acting title is indicated.

All questions are required.

Q3. Do you hold the title of Interim Dean or Acting Dean (or Interim Chief Nursing Administrator)?

If your title is something other than Dean (e.g., Associate Dean) and you are in the interim or acting of that title, please select yes and indicate your title in the next question.

Yes

No

Q4. What is your title? (If your exact title is unavailable as an option, please select the option that most closely approximates your title.)

Q5. Do you hold another administrative title in addition to Dean/Chief Nursing Administrator of the school of nursing?

Yes

No

Q6. What is the other administrative title you hold in addition to Dean or Chief Nursing Administrator?

Q7. How long have you been working in academic nursing as either a faculty member or administrator? (Please respond rounded to the nearest year with a whole number).

Q8. How long have you been at your current institution as a chief nurse administrator?

If you have been the chief nurse administrator for less than 1 year, please enter 0. (Please respond rounded to the nearest year with a whole number).

Q9. How long were you a chief nurse administrator at any previous institutions?

If you were the chief nurse administrator for less than 1 year, please enter 0. (Please respond rounded to the nearest year with a whole number).

Q10. What is your faculty rank?

Q11. What is your level of teaching?

Q12. What is your area of teaching?

Q13. What is your highest earned degree?

Q14. What is your gender identity?

Q15. Do you identify as transgender?

Yes

No

Q16. What is your year of birth?

Q17. What is your race/ethnicity?

Q18. What is your tenure status?

Q19. What is your salary basis?

Q20. Enter your gross salary for the current fiscal year rounded to the nearest dollar without a currency symbol or comma (e.g., 100000).

Include any additional supplemental salary associated with this position.

All information about individual salaries in this survey will be held in strict confidence. Salary data are reported in aggregate form only; no individual responses will be released or reported.

Interim

Q21. What is the reason for your previous dean's departure?

Q22. How long have you been acting or interim dean for your institution?

Q23. Is the dean position posted?

Yes

No

Q24. What is the expected salary basis for the dean position?

Q25. What is the expected salary range for the dean position?
Please enter a whole number with no currency symbol for the minimum and maximum of the range (e.g., 100000 and 200000).

Minimum Salary

Maximum Salary

Block 1

Q26. Please share the contact information for the person who completed this form below. Please enter one name and one email address only.

When entering name, enter in the order of first name and last name without title (For example, John Smith).

Additionally, if you have any comments, please include them below (if none, either write No or N/A).

Once you submit, you will be able to download a PDF of your responses for your records.

Name of the contact person for this form

Email

Do you have any additional comments?

Q27. Moving forward will submit your survey. You will not be able to revise your answers without contacting the AACN IDS team at datarequest@aacnnursing.org.

Please carefully review your responses prior to submission and thank you for your participation.

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