

Thank you for your interest in Hope Impact Partnerships. We are excited to support the important work you do to help students meet their basic needs.

To indicate your interest and commitment to participating, please submit this enrollment application.

Any individual who is authorized to accept the terms on behalf of the institution can proceed with this form. You may want to confer with your institution's Head of Student Affairs to confirm authority to submit this form on behalf of the institution.

Only **one form per institution** should be submitted. It will take about 10-15 minutes to complete once you have the required information assembled. A downloadable PDF version of the

enrollment application is posted on our website, so you can coordinate responses with colleagues prior to beginning a submission.

Please plan to **complete the form in one instance**. It will save your progress across pages, but only if you are using the same device and browser. Therefore, the PDF version noted above will be important to reference as you pre-populate responses.

If you have questions before or as you complete the interest form, please contact us at HIP-info@temple.edu.

The Hope Center is offering three levels of partnership varying in their goals, offerings, and institutional commitment. Which level are you enrolling in and/or applying for? Please select one of the following.

Level I: Students FLevel II: 360 View 8Level III: #RealCha	
Please enter you	r contact information:
Name	

Department	
Title	
Email	
Phone number	
Please provide t	the following information about your institution:
Name	
Mailing Address	
State	

Submission of this form indicates that your institution is committed to engaging with The Hope Center with staff and budgetary resources necessary for success.

Do you have permission and/or authority to complete this form

on behalf of you	r institution?
○ Yes ○ No	
spread information that Hope Impaction least two individual from a	ck benefits from cross-functional structures that on and provide services seamlessly. We find at Partnerships are most successful when at uals from a variety of roles and departments are gage. Have you connected with another nother department (e.g., Institutional Research, to form your team?
○ Yes ○ No	
	st the department(s) included in your s-functional basic needs conversations and/or a maximum of 6)
1.	
2.	

3.	
4.	
5.	
6.	
Partnerships and	ny your institution is interested in Hope Impact d specifically why you chose to apply for the I / Level III] partnership. (100-200 suggested

Upon acceptance to Hope Impact Partnership, we will provide a Research and Aid Assessment Agreement that explicitly details core components for successful implementation and is required to be signed by both parties before services can begin.

This agreement will include Temple's IRB approval for the student survey and requires colleges to use Temple's IRB approval for the student survey and requires colleges to use Temple's IRB approval (colleges may not seek their own IRB approval).

It also includes a commitment to adhere to the Student Basic Needs Survey guidelines in terms of timeline, content of recruitment materials, and student sample to ensure survey results will not be biased or skewed.

Payment is due upon execution of the Research and Aid Assessment Agreement. Level II and Level III institutions are billed for their participation annually.

Does your institution acknowledge that these are necessary elements of a Hope Impact Partnership?

Yes
No

Levels II & III Application Questions

[if Level II or III] The following section of questions will help The Hope Center better understand where your institution is on your journey to help students address their basic needs and achieve academic and personal success. Please answer candidly and know that there is no expectation for previous work to date.

Does your institution have survey data on levels of basic needs insecurity among your students and/or their access to supports? Yes O No [if Level II or III] What is the most recent year that survey data on student basic needs insecurity and/or support access was collected? [if Level II or III] Does your institution currently have a crossdepartment basic needs working group/task force? Yes O No

Final

Please share what specific goals your institution hopes to achieve through participation in the [Level I / Level II / Level III] Hope Impact Partnership. We'd love to hear your thoughts about what success will look like for your community and your students after two years of collaboration. (200-300 suggested word counts)

Powered by Qualtrics