



**American Association
of Colleges of Nursing**

Acting/Interim Dean Questionnaire

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Please answer the following questions and fax to the AACN Mentor Coordinator at 202.785.8320.

Name:	
Institution:	
Email Address:	

1. Describe your nursing program and institution.

2. In what three specific areas would you like mentoring? ie Dean Transition, Time Management, Budgeting, etc.

3. Additional Comments

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