Employer Needs Survey - Summary Form



Compile the results from all Employer Needs Surveys and record them in this summary form. Submit the completed form along with copies of the individual surveys to ADHE as part of your program proposal.

Institution:						
Preparer's Name:	Contact Information:					
Proposed Certificate or Degree Program:						
Names of survey respondents (employers):						

Complete the table below based on the positions aligned with the proposed certificate or degree program.

Position Title	Certificate or Degree Required for Position	Number of Filled Positions	Number of Open Positions	Number of Future Positions	Salary indicate payment basis

Summarize the skills needed for employment in the positions listed above.										
	Indicate the number of employers who gave preference for modality or location.									
Traditional Instruction	Distance Education	Hybrid Instruction	Days	Evenings	Weekends	At Employer Site				
Indicate the type	es of support emp	oloyers will provi	de for the prop	osed certificate or	degree progran	1.				
Summarize any	additional inform	nation provided l	by prospective e	employers.						