

CLINIC CONTACT INFORMATION

Name:			
Clinic:			
Address:			
City:			
State:		Zip Code:	
Telephone:			
E-mail:			

AUDIO & VIDEO CAPABILITIES

Is there a web-cam already connected to or installed on your desktop/laptop?	Yes	No
If you answered NO... <i>Please request a webcam from your workplace to be used for clinical education.</i> Notify us if you are denied this request.	Yes	No

VIDEO CONFERENCE TECHNOLOGY

Have you ever participated in a web-based video conference using Adobe® Connect™?	Yes	No
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CONNECTIVITY

Do you have a high-speed internet connection of AT LEAST 4 Mbps download speed and 1 Mbps upload speed? <i>(http://www.speedtest.net can help you determine the speed of your internet connection)</i>	Yes	No
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PLEASE SEND YOUR COMPLETED SURVEY
VIA FAX TO 239-244-9276
OR
VIA E-MAIL TO SMCINTOSH@USF.EDU