

Health IT Innovation Co-Lab (HII-C) VIP Project - Inquiry Form

Please complete and email as attachment to Dr. Bob Greenes, Director



Your name

E-mail

Tel. no.

Year

Freshman

Sophomore

Junior

Senior

Questions about
the project or
opportunity or
intent to apply?

Interested in
joining the
project?

Yes

Maybe, would like to know more

Not now, maybe later

Any other
comments