

CareerTrac Data Collection Form
US Dept of Health and Human Services / National Cancer Institute / National Institutes of Health

Hello!

The National Institutes of Health (NIH) is delighted to introduce you to CareerTrac, an information system developed to document and improve long term training program outcomes. CareerTrac collects, tracks, and reports information about NIH-supported trainees, such as trainee name, contact information, biographical information, training information, and subsequent career information. The system also supports tracking of trainees' accomplishments, such as fellowships, awards, employment, education, product or policy development, publications, funding received, presentations at conferences, and students mentored.

NIH uses this information to evaluate the long-term outcomes of training program investments and make recommendations for improvement. The information may be aggregated and disclosed with science officers, evaluators and administrators at NIH, and with other organizations such as DHHS, Congress and other organizations interested in NIH training investments and outcomes. Your training grant Principal Investigator (PI) and their administrator(s) also have access to this information; they are responsible for entering the data.

Collection of this information is authorized under 42 U.S.C. 241. The primary use of this information is to identify candidates for clinical and research fellow, clinical elective, and other training positions as well as to maintain a permanent record of those individuals who have received research training at the National Institutes of Health. NIH will take every reasonable precaution to protect your information. CareerTrac is securely hosted behind the NIH firewall; we maintain appropriate physical, electronic and procedural safeguards to ensure the security, integrity and privacy of your personal information.

As a trainee, providing information to CareerTrac is voluntary. NIH requires PIs to track trainees and provide trainee data for 10 years after a trainees' appointment to a training grant. If you choose not to participate, your PI is still expected to enter information on your training experience and outcomes. If you have questions or concerns, please feel free to contact your PI directly or the CareerTrac Administrators FICcareertrac@mail.nih.gov.

Thank you,

The CareerTrac Development Team

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Respondent Burden Statement

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

NIH
Project Clearance Branch
6705 Rockledge Drive, MSC 7974
Bethesda, MD 20892-7974
ATTN: PRA 0925-0568

Do not return the completed form to this address.

This questionnaire includes the following sections:

Trainee Personal Information ("Personal Info Page").....

This section contains questions regarding your personal information, including name, email address, and gender.

Current Address ("Contact Info Page").....

This section contains questions regarding the best way to contact you.

Biographical Information ("Pre-Training Info Page").....

This section contains questions regarding your professional and educational history before your NCI funding / training

In-Training Education & Mentor ("In-Training Experience Page").....

This section contains questions regarding your NCI-funded training experience. It also contains questions regarding the degree or certificate earned through your NCI-funded training, the start and end date of your funding period, and mentor data etc...

Accomplishments ("Accomplishments Page").....

This section contains questions regarding your personal achievements that can be attributed to your NCI-funded training.

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Trainee Personal Information (Personal Info Page)

1. First Name (*required*; please click on text field to enter data):
2. Middle Name:
3. Last Name (*required*):
4. Suffix (i.e. Jr., Sr., I.,):
5. Primary e-mail address (*required*):
6. Secondary e-mail address:
7. Gender (*required*; click on the "SELECT ONE" to display DROP DOWN list): SELECT ONE
8. Country of Origin (*required*):
9. U.S. Citizens or U.S. Residents only (*required for U.S. Citizens and Permanent Residents*; please select ethnicity status; definitions provided below):

☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Choose not to specify

Ethnicity Definitions as defined by the Office of Management and Budget (OMB)

Hispanic or Latino	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can also be used in addition to "Hispanic or Latino."
Not Hispanic or Latino	All other ethnicities
Choose not to specify	Not specified

10. U.S. Citizens or U.S. Residents only (*required for U.S. Citizens and Permanent Residents*; please select all that apply; definitions provided below):

☐ American Indian or Alaskan ☐ Native Hawaiian or Pacific Islander
☐ Asian ☐ White
☐ Black or African American ☐ Choose not to specify

Race Definitions as defined by the Office of Management and Budget (OMB)

American Indian or Alaskan	A person having origins in any of the original peoples of North, Central, or South America, and who maintains tribal affiliations or community attachment
Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. (NOTE: Individuals from the Philippine Islands have been recorded as Pacific Islanders in previous data collection strategies).

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Black or African American	A person having origins in any of the black racial groups of Africa. Terms such as "Haitian"; or "Negro"; can be used in addition to "Black or African American";
Native Hawaiian or Pacific Isl.	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
Choose not to specify	Not specified

Current Address (Contact Info Page)

1. Address (include City, State/ Province, Country, Postal Code):
2. Work and Cell Phone Number (if the number(s) is an international number, include country code, area or city code and local number):

Biographical Information (Pre-Training Page)

1. Last Position & Title prior to Training (*required*; Please select the last professional position from the DROP DOWN list and specify the title held before entering the training program):

SELECT ONE

If 'other', please specify:

Title:

2. Institution or Company prior to Training (please do not use acronyms):
3. Have you received Fogarty funding for Research and/or Training prior to this funding period?
☐ YES ☐ NO
4. Academic degrees held at start of training (You can select more than one degree, as applicable):

Degree or Nature of Training (<i>required</i>)	Country of the institution that granted the degree	Institution that granted the degree (NO acronyms)	Year the degree(s) was awarded (YYYY):
<input type="checkbox"/> Bachelor's			
<input type="checkbox"/> Master's			
<input type="checkbox"/> Other non-degree training (>=3 months)			
<input type="checkbox"/> Postdoctoral position (>= 3 months)			
<input type="checkbox"/> Professional Doctorate (i.e. MD, JD)			
<input type="checkbox"/> Research Doctorate (i.e. PhD)			
<input type="checkbox"/> Short Term Training (<3 months)			

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In-training Experience (In-Training Page)

1. Current Training Status (*required*; select status from DROP DOWN list. Definition of training status is provided below for your convenience): SELECT ONE

- *Pre-training*: If the trainee has been selected to participate in a training program but the training has not yet begun
- *In-training*: If the trainee is currently engaged in an on-going training program including advanced In-country Research Training Support
- *Post-training*: If the trainee has completed the training program

2. Research Training Mentor (Note: if no mentor is associated with the training experience, please leave this entire section blank. Proceed to Section #3: New Education)

a. Mentor's Name (*required*; First and Last Name):

b. Mentor's Institution:

c. Mentor's Department (*required*):

d. Start and End Year of Mentoring (please enter date as YYYY): to

3. New Education

a. Expected duration of training (*required*; please only select one):

- ☐ Long-term (6 months or more)
☐ Medium-term (3 months or more, and less than 6 months)
☐ Short-term (less than 3 months)

b. Date training began (*required*; please enter date in MM/YYYY format):

c. Training completion date or projected end date (*required*; enter date in MM/YYYY format):

d. Is your training completed? (*required*) ☐ YES ☐ NO

e. Return Home (please indicate if you returned to/reside in your home country to study or work immediately following the conclusion of the period in which you are funded by a NCI grant): ☐ YES ☐ NO

f. Degree or Nature of Training (*required*; you may only select one degree.):

- ☐ Bachelor's
☐ Master's
☐ Other non-degree training (≥ 3 months)
 If 'other', please specify:
☐ Postdoctoral position (≥ 3 months)
☐ Professional Doctorate (i.e. medical doctor)
☐ Research Doctorate (i.e. PhD)
☐ Short Term Training (< 3 months)

g. Country of the institution that granted the degree (please do not use acronyms):

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h. Institution that granted the degree (please do not use acronyms):

i. When was the degree awarded or when is the expected award date? (please enter date in MM/YYYY format):

j. Briefly describe trainee's research:

k. Is the majority of training-related research conducted in U.S. or a foreign country?

☐ U.S.

☐ Foreign

☐ Split Equally

l. Broad Research Area (*required*: select one from DROP DOWN list):

SELECT A - I

SELECT M - Z

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m. NIH Field of Training (choose ONE from the list below; NOTE: sections broken into clinical and non-clinical):

Predominantly Non-Clinical or Lab-Based Research Training

BIOCHEMISTRY

- ☐ Biological Chemistry
- ☐ Bioenergetics
- ☐ Enzymology
- ☐ Metabolism

BIOENGINEERING

- ☐ Bioelectric/Biomagnetic
- ☐ Biomaterials
- ☐ Biomechanical Engineering
- ☐ Imaging
- ☐ Instrumentation and Devices
- ☐ Mathematical Modeling
- ☐ Medical Implant Science
- ☐ Nanotechnology
- ☐ Rehabilitation Engineering
- ☐ Tissue Engineering

BIOPHYSICS

- ☐ Kinetics
- ☐ Spectroscopy
- ☐ Structural Biology
- ☐ Theoretical Biophysics

BIOTECHNOLOGY

- ☐ Applied Molecular Biology
- ☐ Bioprocessing and Fermentation
- ☐ Metabolic Engineering

CELL & DEVELOPMENTAL BIOLOGY

- ☐ Cell Biology
- ☐ Developmental Biology

CHEMISTRY

- ☐ Analytical Chemistry
- ☐ Bioinorganic Chemistry
- ☐ Bioorganic Chemistry
- ☐ Biophysical Chemistry
- ☐ Medicinal Chemistry

- ☐ Physical Chemistry
- ☐ Synthetic Chemistry
- ☐ ENVIRONMENTAL SCIENCES

GENETICS

- ☐ Behavioral Genetics
- ☐ Developmental Genetics
- ☐ Genetic Epidemiology
- ☐ Genetics of Aging
- ☐ Genomics
- ☐ Human Genetics
- ☐ Molecular Genetics
- ☐ Population Genetics

IMMUNOLOGY

- ☐ Asthma and Allergic Mechanisms
- ☐ Autoimmunity
- ☐ Immunodeficiency
- ☐ Immunogenetics
- ☐ Immunopathology
- ☐ Immunoregulation
- ☐ Inflammation
- ☐ Structural Immunology
- ☐ Transplantation Biology
- ☐ Vaccine Development

MICROBIOLOGY & INFECTIOUS DISEASE

- ☐ Bacteriology
- ☐ Etiology
- ☐ HIV/AIDS
- ☐ Mycology
- ☐ Parasitology
- ☐ Pathogenesis of Infectious Diseases
- ☐ Virology
- ☐ MOLECULAR BIOLOGY

NEUROSCIENCE

- ☐ Behavioral Neuroscience
- ☐ Cellular Neuroscience

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- ☐ Cognitive Neuroscience
- ☐ Communication Neuroscience
- ☐ Computational Neuroscience
- ☐ Developmental Neuroscience
- ☐ Molecular Neuroscience
- ☐ Neurochemistry
- ☐ Neurodegeneration
- ☐ Neuroparmacology
- ☐ Systems/Integrative Neuroscience
- ☐ PUBLIC HEALTH
- ☐ NUTRITIONAL SCIENCES

PHARMACOLOGY

- ☐ Molecular Pharmacology
- ☐ Pharmacodynamics
- ☐ Pharmacogenetics
- ☐ Toxicology

PHYSIOLOGY

- ☐ Aging
- ☐ Anesthesiology (basic science)
- ☐ Endocrinology (basic science)
- ☐ Exercise Physiology (basic science)
- ☐ Integrative Biology
- ☐ Molecular Medicine
- ☐ Physiological Optics
- ☐ Reproductive Physiology

PLANT BIOLOGY

PSYCHOLOGY, NON-CLINICAL

- ☐ Behavioral Communication Sciences
- ☐ Behavioral Medicine
- ☐ Cognitive Psychology
- ☐ Developmental & Child Psychology
- ☐ Experimental & General Psychology
- ☐ Mind-Body Studies
- ☐ Neuropsychology

- ☐ Personality and Emotion
- ☐ Physiological Psychology & Psychobiology
- ☐ Psychology of Aging
- ☐ Psychometrics
- ☐ Psychophysics
- ☐ Social Psychology
- ☐ Disease Prevention and Control
- ☐ Epidemiology
- ☐ Health Economics
- ☐ Health Education
- ☐ Health Policy Research
- ☐ Health Services Research
- ☐ Occupational & Environmental Health

RADIATION, NON-CLINICAL

- ☐ Nuclear Chemistry
- ☐ Radiation Physics
- ☐ Radiobiology

SOCIAL SCIENCES

- ☐ Anthropology
- ☐ Bioethics
- ☐ Demography & Population Studies
- ☐ Economics
- ☐ Education
- ☐ Language & Linguistics
- ☐ Sociology

STATISTICS AND/OR RESEARCH METHODS AND/OR INFORMATICS

- ☐ Biostatistics and/or Biometry
- ☐ Bioinformatics
- ☐ Computational Science
- ☐ Information Science
- ☐ Clinical Trials Methodology

TRAUMA, NON-CLINICAL

- ☐ OTHER, PREDOMINANTLY NON-CLINICAL OR LAB-BASED RESEARCH

TRAINING

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Predominantly Clinical Research Training (can include any degree)

ALLIED HEALTH

- ☐ Allied Health: Audiology
- ☐ Allied Health: Community Psychology
- ☐ Allied Health: Exercise Physiology (clinical)
- ☐ Allied Health: Medical Genetics
- ☐ Allied Health: Occupational Health
- ☐ Allied Health: Palliative Care
- ☐ Allied Health: Physical Therapy
- ☐ Allied Health: Pharmacy
- ☐ Allied Health: Social Work
- ☐ Allied Health: Speech-language Pathology
- ☐ Allied Health: Rehabilitation
- ☐ DENTISTRY

CLINICAL DISCIPLINES

- ☐ Allergy
- ☐ Anesthesiology
- ☐ Behavioral Medicine (clinical)
- ☐ Cardiovascular Diseases
- ☐ Clinical Laboratory Medicine
- ☐ Clinical Nutrition
- ☐ Clinical Pharmacology
- ☐ Complementary and Alternative Medicine
- ☐ Clinical Psychology
- ☐ Connective Tissue Diseases
- ☐ Dermatology
- ☐ Diabetes
- ☐ Gastroenterology
- ☐ Endocrinology
- ☐ Immunology
- ☐ Gene Therapy (clinical)

- ☐ Clinical Disciplines: Geriatrics
- ☐ Hematology
- ☐ HIV/AIDS
- ☐ Infectious Diseases
- ☐ Liver Diseases
- ☐ Metabolic Diseases
- ☐ Nephrology
- ☐ Neurology
- ☐ Ophthalmology
- ☐ Nuclear Medicine
- ☐ OB-GYN
- ☐ Oncology
- ☐ Orthopedics
- ☐ Otorhinolaryngology
- ☐ Preventive Medicine
- ☐ Radiation, Interventional
- ☐ Pulmonary Diseases
- ☐ Radiology, Diagnostic
- ☐ Rehabilitation Medicine
- ☐ Psychiatry
- ☐ Surgery
- ☐ Trauma
- ☐ Urology
- ☐ PEDIATRICS DISCIPLINES: Pediatric Endocrinology
- ☐ Pediatric Hematology
- ☐ Pediatric Oncology
- ☐ Pediatric, Prematurity & Newborn
- ☐ NURSING
- ☐ VETERINARY MEDICINE
- ☐ OTHER, PREDOMINANTLY CLINICAL RESEARCH TRAINING

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n. Scientific Field method of training (*required*: select up to six technical fields):

<input type="checkbox"/> Acute Care	<input type="checkbox"/> Digestive Disease	<input type="checkbox"/> Neonatal Health
<input type="checkbox"/> Addictive Behavior	<input type="checkbox"/> Disease Transmission	<input type="checkbox"/> Neuromuscular Disorders
<input type="checkbox"/> Affective Disorders	<input type="checkbox"/> Drug Discover	<input type="checkbox"/> Nutrition
<input type="checkbox"/> Air Quality	<input type="checkbox"/> Drug Resistance	<input type="checkbox"/> Obesity
<input type="checkbox"/> Alzheimer's Disease	<input type="checkbox"/> Education	<input type="checkbox"/> Opportunistic Infections
<input type="checkbox"/> Anemia	<input type="checkbox"/> Emerging Infectious Diseases	<input type="checkbox"/> Pain
<input type="checkbox"/> Arthritis	<input type="checkbox"/> Epidemiology	<input type="checkbox"/> Parasitic Disease
<input type="checkbox"/> Asthma	<input type="checkbox"/> Evaluation	<input type="checkbox"/> Parkinson's disease
<input type="checkbox"/> Autism	<input type="checkbox"/> Eye Diseases	<input type="checkbox"/> Perinatal Health
<input type="checkbox"/> Behavior	<input type="checkbox"/> Fertility	<input type="checkbox"/> Pesticides
<input type="checkbox"/> Behavioral Studies	<input type="checkbox"/> Gender Analysis	<input type="checkbox"/> Pneumonia
<input type="checkbox"/> Bioassays	<input type="checkbox"/> Genomics	<input type="checkbox"/> Pregnancy
<input type="checkbox"/> Biodiversity	<input type="checkbox"/> GIS	<input type="checkbox"/> Psychiatric Disorders
<input type="checkbox"/> Biomarkers	<input type="checkbox"/> Hanta Virus	<input type="checkbox"/> Pulmonary Diseases
<input type="checkbox"/> Biomedical Imaging	<input type="checkbox"/> Health Policy	<input type="checkbox"/> Rabies
<input type="checkbox"/> Biotechnology	<input type="checkbox"/> Healthy Systems	<input type="checkbox"/> Rehabilitation Medicine
<input type="checkbox"/> Bipolar Disorder	<input type="checkbox"/> Heavy Metals	<input type="checkbox"/> Respiratory Diseases
<input type="checkbox"/> Birth Defects	<input type="checkbox"/> Helminthic Infections	<input type="checkbox"/> Rickettsia
<input type="checkbox"/> Blood Disorders	<input type="checkbox"/> Hepatitis	<input type="checkbox"/> Road Traffic Injuries
<input type="checkbox"/> Cancer	<input type="checkbox"/> Herpes	<input type="checkbox"/> Schistosomiasis
<input type="checkbox"/> Cardiovascular Disease	<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> Schizophrenia
<input type="checkbox"/> Cholera	<input type="checkbox"/> Human Papilloma Virus	<input type="checkbox"/> Sexually Transmitted Infections
<input type="checkbox"/> Climate	<input type="checkbox"/> Imaging	<input type="checkbox"/> Shigellosis
<input type="checkbox"/> Clinical Trials	<input type="checkbox"/> Infant Health	<input type="checkbox"/> Skin Diseases
<input type="checkbox"/> Cognitive Disorders	<input type="checkbox"/> Influenza	<input type="checkbox"/> Smallpox
<input type="checkbox"/> Cohort Population Studies	<input type="checkbox"/> Informed Consent	<input type="checkbox"/> Statistics
<input type="checkbox"/> Communication Disorders	<input type="checkbox"/> IRB Development & Policies	<input type="checkbox"/> Stigma
<input type="checkbox"/> Contraceptives	<input type="checkbox"/> Kidney Diseases	<input type="checkbox"/> Stroke
<input type="checkbox"/> Cost Effectiveness Studies	<input type="checkbox"/> Leishmaniasis	<input type="checkbox"/> Substance Abuse
<input type="checkbox"/> Craniofacial Disorders	<input type="checkbox"/> Leptospirosis	<input type="checkbox"/> Surveillance
<input type="checkbox"/> Database Development	<input type="checkbox"/> Macroeconomics	<input type="checkbox"/> Telemedicine
<input type="checkbox"/> Deafness	<input type="checkbox"/> Malaria	<input type="checkbox"/> Tobacco-Related Diseases
<input type="checkbox"/> Degenerative Nerve Disease	<input type="checkbox"/> Malnutrition	<input type="checkbox"/> Toxicology
<input type="checkbox"/> Dengue	<input type="checkbox"/> Microbial Communities	<input type="checkbox"/> Trypanosomes
<input type="checkbox"/> Dental/Oral Health	<input type="checkbox"/> Microbicides	<input type="checkbox"/> Tuberculosis
<input type="checkbox"/> Depression	<input type="checkbox"/> Microeconomics	<input type="checkbox"/> Vaccines
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Micronutrients	<input type="checkbox"/> Viral Diseases
<input type="checkbox"/> Diagnostics	<input type="checkbox"/> Migraines	<input type="checkbox"/> Water Quality
<input type="checkbox"/> Diarrheal & Gastrointestinal Diseases	<input type="checkbox"/> Modeling	<input type="checkbox"/> Zoonosis
<input type="checkbox"/> Dietary Supplements	<input type="checkbox"/> Molecular Biology	<input type="checkbox"/> {Other}
	<input type="checkbox"/> Musculoskeletal Diseases	

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o. Advanced in-country mentor research support (indicate if you received funds for re-entry when you returned to home country): ☐ YES ☐ NO

p. Please indicate if your training contributed to support any of the following:

To enable NCI to coordinate with other international activities, it is important to know if trainee's AIDS work contributed to any of these programs:

- | | |
|---|--|
| <input type="checkbox"/> N/A (Not Applicable) | <input type="checkbox"/> CIPRA (Comprehensive International Programs for Research on AIDS) |
| <input type="checkbox"/> CDC - PEPFAR | <input type="checkbox"/> CPOL (Community Popular Opinion Leaders) |
| <input type="checkbox"/> GPA Research | <input type="checkbox"/> HPTN (HIV Prevention Trials Network) <input type="checkbox"/> HVTN (HIV Vaccine Trials Network) |

q. Associated Research or Training Sponsor (list the sponsor of any research funding other than NCI under which you conducted research.

- | | |
|--|---|
| <input type="checkbox"/> {Other} | <input type="checkbox"/> Merck |
| <input type="checkbox"/> Abbott | <input type="checkbox"/> Novartis |
| <input type="checkbox"/> American Heart Association | <input type="checkbox"/> Novo Nordisk |
| <input type="checkbox"/> Andrew Mellon Foundation | <input type="checkbox"/> Path |
| <input type="checkbox"/> Astrazeneca | <input type="checkbox"/> PEPFAR |
| <input type="checkbox"/> Bristol-Myers Squibb | <input type="checkbox"/> Pfizer |
| <input type="checkbox"/> Carnegie Corporation | <input type="checkbox"/> Robert Wood Jounson Foundation |
| <input type="checkbox"/> DNDI | <input type="checkbox"/> Rockefeller Foundation |
| <input type="checkbox"/> Doris Duke Foundation | <input type="checkbox"/> Sanofi- Aventis |
| <input type="checkbox"/> Eli Lilly | <input type="checkbox"/> US AID |
| <input type="checkbox"/> Ellison Medical Foundation | <input type="checkbox"/> US CDC |
| <input type="checkbox"/> European Union | <input type="checkbox"/> US Department of Education |
| <input type="checkbox"/> Ford Foundation | <input type="checkbox"/> US Department of State |
| <input type="checkbox"/> Foundation for Innovative New Diagnostics | <input type="checkbox"/> US DOD |
| <input type="checkbox"/> Gates Foundation | <input type="checkbox"/> US EPA |
| <input type="checkbox"/> Glaxosmithkline | <input type="checkbox"/> US NASA |
| <input type="checkbox"/> Global Alliance for TB Drug Development | <input type="checkbox"/> US National Institutes of Health |
| <input type="checkbox"/> Global Fund for AIDS TB/Malaria | <input type="checkbox"/> US National Science Foundation |
| <input type="checkbox"/> Google Foundation | <input type="checkbox"/> US NOAA, DOC |
| <input type="checkbox"/> IAVI (Internt'l AIDS Vaccine Initiative) | <input type="checkbox"/> USDA |
| <input type="checkbox"/> Institute for One World Health | <input type="checkbox"/> Wellcome Trust |
| <input type="checkbox"/> International Life Sciences Institute | <input type="checkbox"/> William and Flora Hewlett Foundation |
| <input type="checkbox"/> Int'l Partnership for Microbicides | <input type="checkbox"/> World AIDS Foundation |
| <input type="checkbox"/> Macarthur Foundation | <input type="checkbox"/> World Bank |
| <input type="checkbox"/> Medicines for Malaria Venture | <input type="checkbox"/> World Health Organization |

r. Was training funded using ARRA money?: ☐ YES ☐ NO

Accomplishments (Accomplishments Page)

Please only enter accomplishments that can be attributed to NCI-funded training.

1. Career Highlights/Leadership

a. Career Highlight Year Began (*required*; YYYY):

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- b. Career Highlight Year Ended (YYYY):
- c. Title (*required*; enter your title during the event):
- d. Description (*required*; Please provide information as to how NCI research training has facilitated or contributed to you career development and/or your capacity to be an effective leader.)

Career Highlight Example:

Country: Mexico. Eleanor Millstone, MD, PhD: Graduate of the XYZ Fogarty research training program, received four medals from the Government of Mexico in recognition of her achievements in controlling both HIV/AIDS and TB in Mexico. She also recently received and accepted a request to become the Chair of Mexico AIDS Committee. She has submitted and received several U.S. grants to conduct AIDS research in Mexico.

Enter description:

- e. Training Status When Accomplished (*required*):

☐ Pre-training ☐ In-training ☐ Post-training

2. Employment

- a. Training Status when accomplished (*required*; report your training status when you obtained employment): ☐ Pre-training ☐ In-training ☐ Post-training
- b. Job Title (*required*):
- c. Country of Employment and name of the Employer:
- d. Employment Sector (*required*; please select only one): SELECT ONE
- d. Employment Beginning date (*required*; enter date as YYYY):
- e. Employment End date (enter date as YYYY):
- f. What is the major emphasis of this position? (Check the option(s) that describes the main focus of your job, you may pick more than one): SELECT ONE
- g. If you selected 'research' as your answer to question 2f, please select the field that best describes your area of research from the DROP DOWN list SELECT A - I SELECT M - Z

3. Fellowships

- a. Training status when fellowship was awarded (*required*):
- ☐ Pre-training ☐ In-training ☐ Post-training
- b. Fellowship name (*required*):
- c. Awarding Institution or agency (*required*):
- d. Year received (*required*; enter date as YYYY):

4. Honors/Awards

- a. Training status when you received the honors/awards (*required*):
- ☐ Pre-training ☐ In-training ☐ Post-training
- b. Name of Honor/ Award (*required*):
- c. Awarding Entity (*required*; name of the institution or agency that granted the honor or award):
- d. Location (country) of awarding Entity (*required*):
- e. Year Received or Initiated (*required*; enter date as YYYY):

5. Post-Training Education:

- a. Training status when you received the honors/awards (*required*):

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☐ Pre-training ☐ In-training ☐ Post-training

- b. Name and country of the Institution granting the degree (*required*):
c. Degree or nature of training to be earned (*required*): SELECT ONE
d. Year the degree was / will be awarded (*required*; enter date as YYYY):

6. Post-Training New Competitive Funding

- a. Trainee's role on post- training funded award (from the DROP DOWN list, choose your role on other (research) grants): SELECT ONE
b. Start date of funded award (*required*; MM/YYYY):
c. Is new funding related to a scientific area of Fogarty training? ☐ YES ☐ NO
d. Title of the award (*required*):
e. Award Number:
f. Name of Funding Organization (*required*; select from the DROP DOWN list provided. If the organization is not listed, please select 'other' and provide the name of organization in the box below):
SELECT A - L SELECT M - U SELECT V - Z
g. Country where funding organization is located:
h. If the funded award is involved with any major international initiative, please select from the list:
SELECT ONE

7. Product or Policy Development

- a. Training status during product or policy development (*required*):
☐ Pre-training ☐ In-training ☐ Post-training
b. Did any of your work on this grant result in the development or implementation of the following? (From the list provided, choose the one most applicable.): SELECT ONE
c. If this development is described in a publication(s), enter citation, patent or URL:
d. In a few lines, please describe the policy or product (*required*):
e. In a few lines, please describe the significance of the product or policy and if appropriate, its implementation (*required*; example: Dr. ABC received post-doctoral training from Fogarty funded XYZ program. She was instrumental in developing policy on smoking ban in public places in India that was enacted in year XXXX. This policy is having widespread public health impact on protecting nonsmokers from the hazards of breathing in other people's tobacco smoke):
f. Year of product or policy development (YYYY):
g. Did development result in non-provisional patent? ☐ YES ☐ NO
h. Did any of your products or policies have demonstrable effects on U.S. health science and public health interventions? ☐ YES ☐ NO

8. Publications

If you know the PubMed or PubMedCentral ID for each publication please write them, separated by semi colons.

For those publications without a PubMed ID, please use a different column for each relevant publication. Feel free to use as many or as few columns as you need.

CareerTrac Data Collection Form
US Dept of Health and Human Services / National Cancer Institute / National Institutes of Health

Training status when research was conducted:	SELECT ONE	SELECT ONE	SELECT ONE	SELECT ONE
Article Title (<i>required</i>):				
Journal name (<i>required</i>):				
Volume and pages:				
Journal publication date (MM/YYYY):				
First author (<i>required</i>):				
Last author (enter the name of article's last author in Last name, first name format):				
Other authors (enter the name of article's other authors (separated by a semi-colon) in Last name; first name format):				
PMID number				
PMCID number				
Has this article been Peer Reviewed?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Training Status when Research Conducted:	<input type="checkbox"/> Pre-training <input type="checkbox"/> In-training <input type="checkbox"/> Post-training	<input type="checkbox"/> Pre-training <input type="checkbox"/> In-training <input type="checkbox"/> Post-training	<input type="checkbox"/> Pre-training <input type="checkbox"/> In-training <input type="checkbox"/> Post-training	<input type="checkbox"/> Pre-training <input type="checkbox"/> In-training <input type="checkbox"/> Post-training
Journal Readership/ distribution:	<input type="checkbox"/> Local <input type="checkbox"/> International	<input type="checkbox"/> Local <input type="checkbox"/> International	<input type="checkbox"/> Local <input type="checkbox"/> International	<input type="checkbox"/> Local <input type="checkbox"/> International
Research country (country(ies) in which research described in the article took place):				
Is research reported in this publication supported by a Fogarty Training grant? (<i>required</i>):	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Please indicate whether Fogarty support is acknowledged in	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

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the article (<i>required</i>):				
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9. Students

a. Number and year of students (*required*; indicate the number of students that you have trained/educated in an area related to your Fogarty training. e.g. trained 5 students in 2003, 8 students in 2004 etc):

b. Training status when accomplished (*required*):

☐ Pre-training

☐ In-training

☐ Post-training

10. Posters at scientific meetings

a. Training status when accomplished (*required*):

☐ Pre-training

☐ In-training

☐ Post-training

b. Number and year of posters given at scientific conferences (*required*; e.g. 3 posters in 2007; 5 posters in 2008 etc):