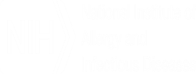
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**US – GEORGIA PROGRAM-DEVELOPMENT WORKSHOP**

**Office of Global Research, National Institute of Allergy and Infectious Diseases**

**National Institutes of Health, U.S. Department of Health and Human Services**

**Tbilisi, Georgia, June 16 - 18, 2014**

OMB Control #0925-0668

Expiration Date: 01/31/2016

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Thank you for attending the **US – Georgia Program- Development** sessions, please take a few minutes to let us know what you thought about the workshop sessions and the various colleagues you met. Your opinion is valued and will be used to shape future workshop sessions.

**Overall Evaluation Form**

1. Are you a U.S. federal government employee (non-contractor)?: ⭘ Yes ⭘ No

**Workshop Content:**

1. The content of the workshop sessions were appropriate and informative.

⭘ Agree

⭘ Somewhat agree

⭘ Neutral

⭘ Somewhat disagree

⭘ Disagree

1. The workshop content was related to the skills and knowledge I needed.

⭘ Agree

⭘ Somewhat agree

⭘ Neutral

⭘ Somewhat disagree

⭘ Disagree

1. The workshop was interesting.

⭘ Agree

⭘ Somewhat agree

⭘ Neutral

⭘ Somewhat disagree

⭘ Disagree

1. The workshop sessions introduced me to a lot of new information.

⭘ Agree

⭘ Somewhat agree

⭘ Neutral

⭘ Somewhat disagree

⭘ Disagree

1. How satisfied are you with what you learned at this workshop?

⭘ Satisfied

⭘ Somewhat Satisfied

⭘ Neutral

⭘ Somewhat Dissatisfied

⭘ Dissatisfied

1. What is the most important concept or idea you learned during the workshop?

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1. How will the information gained at this workshop aid you in your work?

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**Potential Collaborations:**

1. Were you able to meet any potential collaborators?: ⭘ Yes ⭘ No
2. How likely are you to apply for a seed grant with collaborators you’ve met at this workshop?

⭘ Very Likely ⭘ Likely ⭘ Neutral ⭘ Unlikely ⭘ Very Unlikely

*Thank you for completing the survey, please return it to Dr. Ranjan Gupta.*