



DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health
Center for Scientific Review
Office of the Director
6701 Rockledge Dr., Rm. 3016
Bethesda, Maryland 20892-7776

Feb 28, 2012

SUBMISSION OF INFORMATION COLLECTION
UNDER GENERIC CLEARANCES

DATE OF REQUEST: 2/16/2012

SUB AGENCY (I/C): CSR

TITLE: Fellowship Review Evaluation

GENERIC CLEARANCE UNDER OMB# 0925-0474 **EXP. DATE:** 10/31/2014

ABSTRACT:

The mission of CSR is to ensure that NIH grant applications receive fair, independent, expert and timely scientific review. A critical aspect to CSR's operations is the review of applications for research fellowships since this provides support to the next generation of biomedical researchers as they develop their careers. Recently, CSR has piloted a modified platform for Fellowship review which results in greater efficiency. The platform is being evaluated through collecting feedback from participating expert reviewers. . CSR proposes to conduct an evaluation of the modified approach under OMB control number 0925-0474, with expiration date 10/31/2014. : The survey will assess satisfaction of reviewers with the various Fellowship platforms in deployment. It will also allow reviewers to identify key factors contributing to the level of satisfaction they experienced. The information collected from the survey will help refine and improve the quality of CSR's review operations. Automated information technology will be used to collect and process data for this survey. Participation in the survey will be strictly voluntary and individual respondents will not be identified. CSR will not provide payment or other forms of remuneration to respondents in collecting feedback.

TOTAL ANNUAL BURDEN APPROVED: 479 hrs

BURDEN USED TO DATE: 67

BURDEN THIS REQUEST: 25

IS RACE AND ETHNICITY DATA COLLECTED AS REQUIRED?

 YES X NO N/A

OBLIGATION TO RESPOND:

 X VOLUNTARY

 REQUIRED TO OBTAIN OR RETAIN BENEFITS

 MANDATORY

HOW WILL THIS SURVEY BE OFFERED?

WEB SITE

TELEPHONE INTERVIEW

MAIL RESPONSE

IN PERSON INTERVIEW

OTHER: _____

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