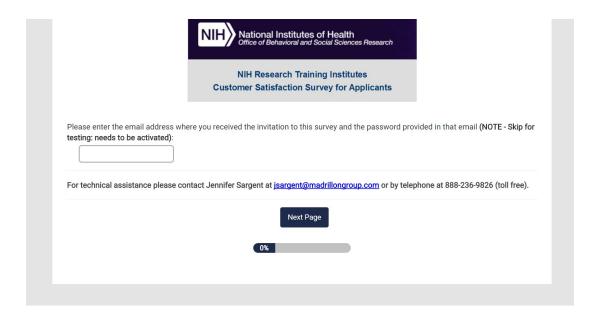
Screen Shots: SRTI Applicants Survey



Save and continue survey later



NIH Research Training Institutes Customer Satisfaction Survey for Applicants

OMB Control Number: 0925-0648

Expiration Date: 03/2018

Informed Consent Form

Identification of Project

Office of Behavioral and Social Sciences Research (OBSSR) NIH Research Training Institutes Customer Satisfaction Survey for Applicants.

Statement of Age of Subject

I state that I am at least 18 years of age and wish to participate in a survey being conducted by the National Institutes of Health (NIH), Office of Behavioral and Social Sciences Research (OBSSR) Bethesda, MD 20892.

<u>Purpose</u>

The purpose of this survey is to assess satisfaction with the NIH Training Institutes offered by OBSSR and determine ways this program can be improved.

Procedure

Participants will be asked to access a web-based questionnaire and complete the questionnaire by a specific date. The total time involved, including instructions, will be no more than 10 minutes.

Confidentiality

All information collected in this survey will be kept secure to the extent permitted by law. I understand that the data I provide will be grouped with data that others provide for the purpose of reporting and presentation, and that my name will not be used.

Risks

I understand that the risks of my participation are expected to be minimal in nature.

Benefits, Freedom to Withdraw, & Ability to Ask Questions

I understand that this survey is not designed to help me personally but that the investigators hope to determine satisfaction with the NIH Training Institutes and ways this program can be improved. I am free to ask questions or withdraw from participation at any time and without penalty.

Contact Information

For questions regarding the survey or any study-related issues, please contact Jaclyn Crouch (jaclyn.crouch@nih.gov). If you have any technical questions and/or have difficulty accessing the survey please contact Jennifer Sargent by email at jacquet@madrillongroup.com or by telephone at 888-236-9826 (toll-free).

Burden Disclosure: Public reporting burden for this collection of information is estimated to range from 10 minutes per response, including the time for reviewing instructions, searching existing data sources, 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, 670'S Rockledge Drive, MSC 579'A, Bethesda, MD 20892-7974, ATTN: PRA (0925/0648). Do not return the completed form to this address.

Agreement to Consent *

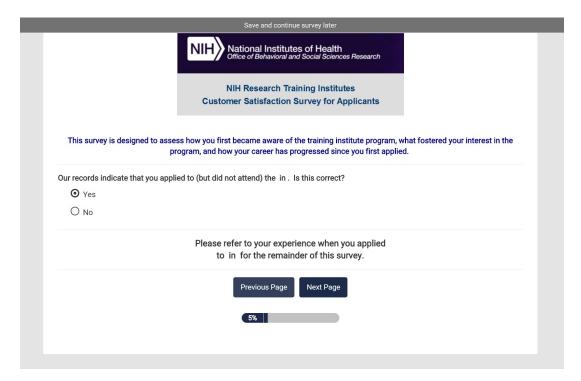
0	I have read the information	about this study	and La	agree to par	ticinate in this si	irvev

-	٦.	I have read the			44.4				
(I have read the	information at	out this stud	v and Idoi	not wish to na	articinate in th	nis survev at :	this time

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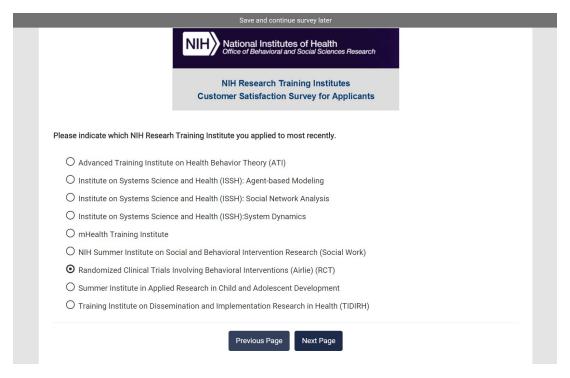
Next Page

If respondents confirm records of most recent training institute to which they applied (Note: information will be piped in so it will read "Our records indicate you applied to (but did not attend) the [Respondent's Training Institute] in [Year].):

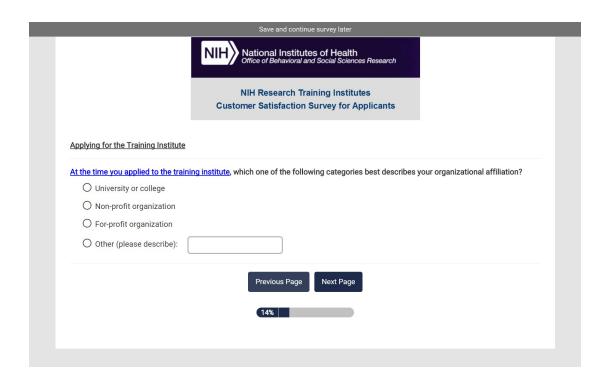


If the respondent selects "yes" instructions will pipe in the institute and year so that it will read "Please refer to your experience when you applied to [Institute] in [Year] for the remainder of this survey".

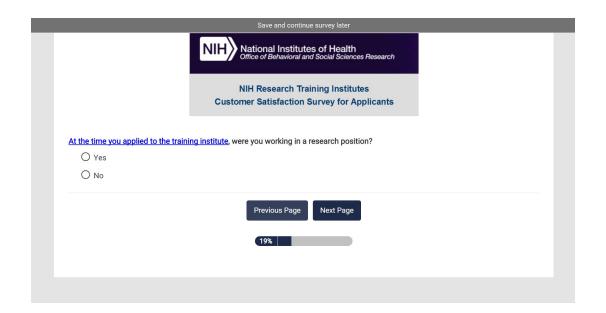
If respondents indicate that our records are not correct:

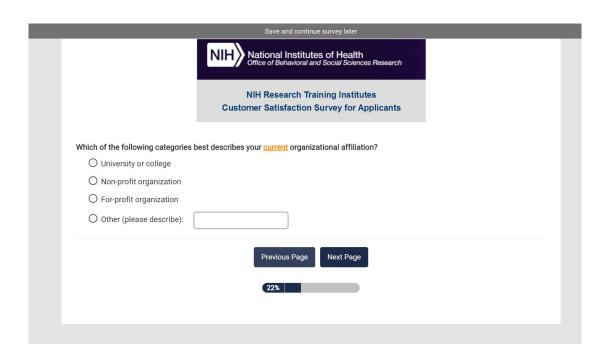


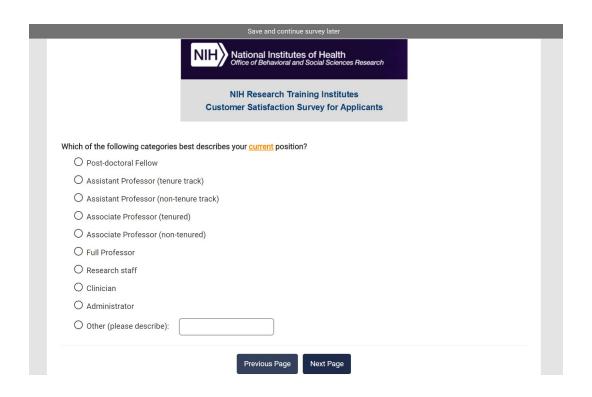
	Save and continue survey later
	National Institutes of Health Office of Behavioral and Social Sciences Research
	NIH Research Training Institutes Customer Satisfaction Survey for Applicants
What year did you apply to theRar	ndomized Clinical Trials Involving Behavioral Interventions (Airlie) (RCT)?
O 2001	
O 2002	
O 2003	
O 2004	
O 2005	
O 2006	
O 2007	
O 2008	
O 2009	
O 2010	
O 2011	
O 2012	
O 2013	
	Please refer to your experience around the time of the most recent training institute you applied to for the remainder of this survey. Thank you.
	Previous Page Next Page

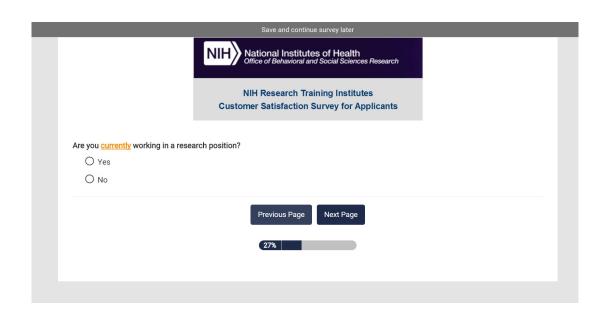


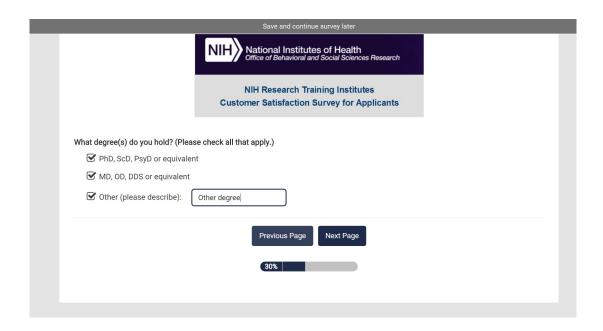
	Save and continue survey later	
	NIH National Institutes of Health Office of Behavioral and Social Sciences Research	
	NIH Research Training Institutes Customer Satisfaction Survey for Applicants	
At the time you applied to the traini	ng institute, which of the following categories best describes you	r position?
O Post-doctoral fellow		
O Assistant Professor (tenure	track)	
O Assistant Professor (non-te	nure track)	
O Associate Professor (non-te	enured)	
O Associate Professor (tenure	ed)	
O Full Professor		
O Research staff		
O Clinician		
O Administrator		
Other (please describe):		
	Previous Page Next Page	



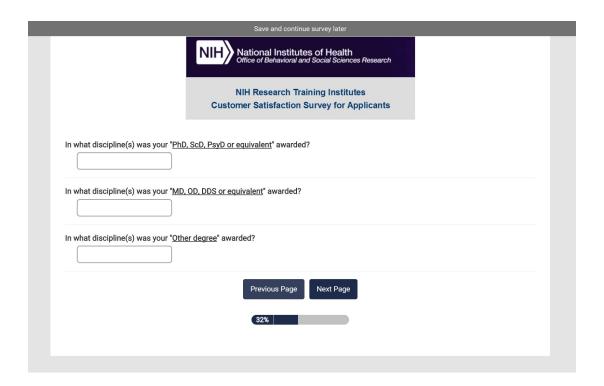






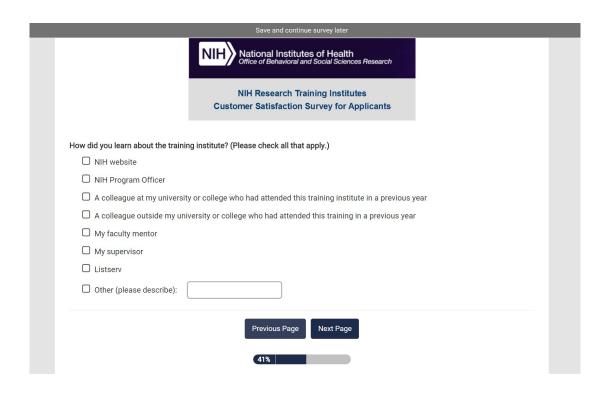


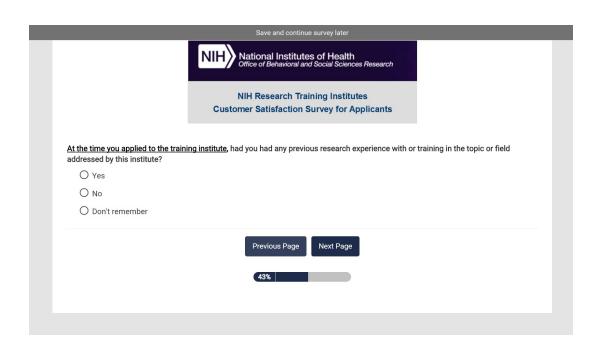
Items below are presented depending on responses to above question:

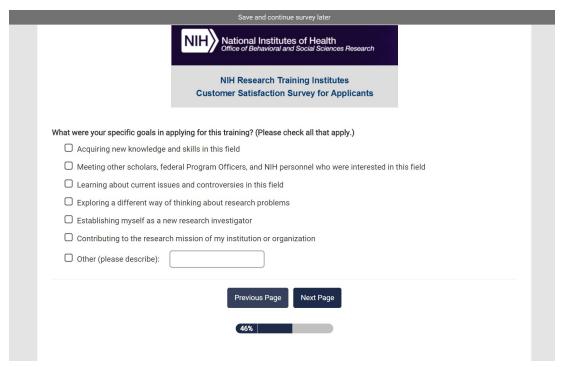


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NIH National Institutes of Health Office of Behavioral and Social Sciences Research						
NIH Research Training Institutes Customer Satisfaction Survey for Applicants						
Prior to applying for the training institute, had you received a research grant from any of the following Federal agencies: (Please check all that apply.)						
☐ Agency for Healthcare Research and Quality (AHRQ)						
☐ Centers for Disease Control and Prevention (CDC)						
☐ Department of Defense (DoD)						
☐ Department of Veterans Affairs (VA)						
☐ National Institutes of Health (NIH)						
☐ National Science Foundation (NSF)						
Other Federal agency (please describe):						
☐ I had not received a research grant prior to applying for the training institute						
Previous Page Next Page						
35%						

	Save and continue survey later	
	NIH National Institutes of Health Office of Behavioral and Social Sciences Research	
	NIH Research Training Institutes Customer Satisfaction Survey for Applicants	
What is your gender?		
O Male O Female		
	Previous Page Next Page	
	38%	







NII	H Research 1	utes of Health and Social Scienc Training Institu n Survey for A	tes		
Did you have a research mentor (or research mentor institute? • Yes • No	rs) at your rese	earch institution o	or organization w	/hen you applie	d to the training
Please check one in each row:	A lot	4	3	2	Not at all
To what extent was your mentor engaged in research activities that were consistent with the training institute research field?	0	0	0	0	0
To what extent did your mentor support your intention to apply to the training institute?	0	0	0	0	0
	Previous Page	Next Page			

		ning Institutes survey for App			
inking about the research environment (research cent titute, (Please check one in each row.)	er, department	t, etc.) in which y	ou were workin	g when you ap	plied to the trainir
	A lot 5	4	3	2	Not at all 1
To what extent were others in your research environment conducting research activities on topics similar to those in the training institute research field?	0	0	0	0	0
To what extent did your supervisor support your intention to apply to the training institute?	0	0	0	0	0
	evious Page	Next Page			

	Save and continue survey later	
	NIH National Institutes of Health Office of Behavioral and Social Sciences Research	
	NIH Research Training Institutes Customer Satisfaction Survey for Applicants	
Your Research Career		
Since you applied to the training	institute, which one of the following is true for you? (Please check o	one.)
I have completed alternation	ive training in this research topic or field.	
O I sought, but did not find a	lternative training in this research topic or field.	
O I have not sought any alte	rnative training in this research topic or field.	
Where and when did you complet	te this training?	
Where:		
What year:		
	Previous Page Next Page	
	54%	

NIH National Institutes of Health Office of Behavioral and Social Sciences Research NIH Research Training Institutes Customer Satisfaction Survey for Applicants									
ninking about the specific research topic or field acted that the specific research topic or field acted to the specific research topic resear	ddressed by the	training institut	e to which you n	nost recently ap	plied, to what				
	A lot 5	4	3	2	Not at all 1				
Retained your scientific interest in this topic or field in general?	0	0	0	0	0				
Continued to read journal articles or books related to this field?	0	0	0	0	0				
Attended conference sessions or meetings focusing on this topic or field?	0	0	0	0	0				
Retained your interest in conducting research in this topic or field?	0	0	0	0	0				
	Previous Page	Next Page	1						
•			•						

NIH National Institutes of Health
Office of Behavioral and Social Sciences Research

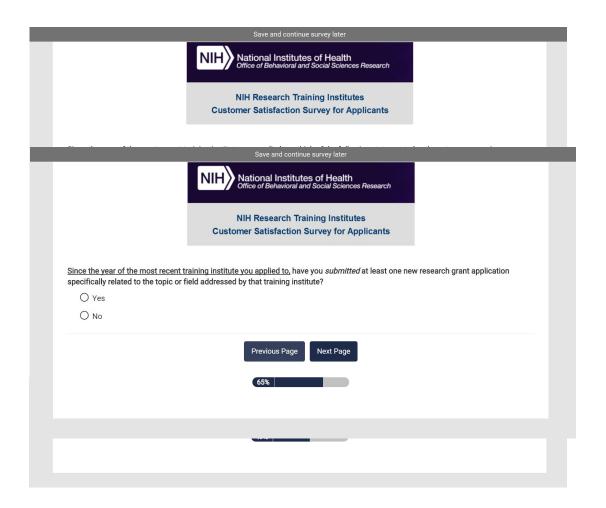
NIH Research Training Institutes Customer Satisfaction Survey for Applicants

How confident do you feel in your ability to perform the following activities related to the specific topic or field addressed by the training institute? (Please check one response in each row.)

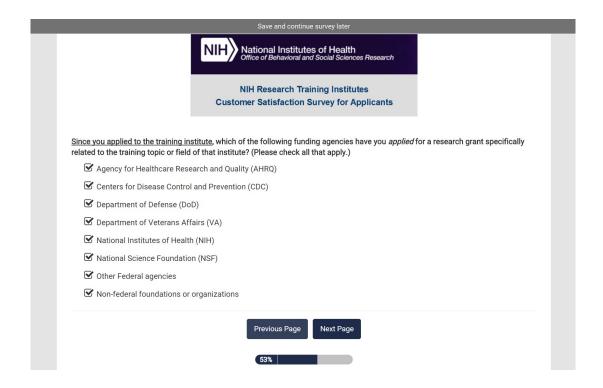
	Extremely 5	4	3	2	Not at all	Not Applicable
Your ability to formulate a researchable problem or question related to the specific topic or field addressed by the training institute?	0	0	0	0	0	0
Your ability to design an appropriate research study to address this problem?	0	0	0	0	0	0
Your ability to prepare a successful research grant application?	0	0	0	0	0	0
Your ability to write a scientific research publication?	0	0	0	0	0	0

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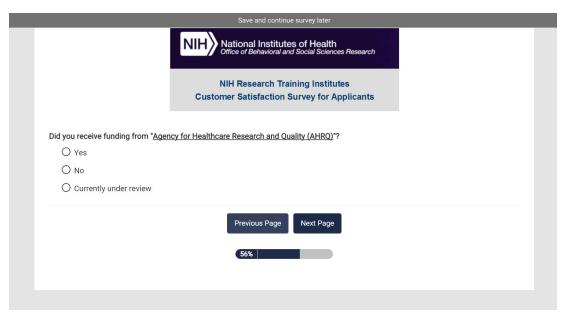
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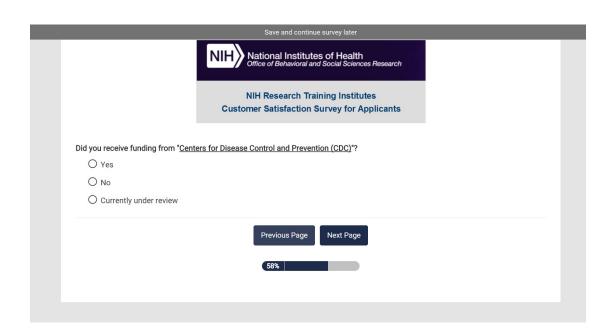


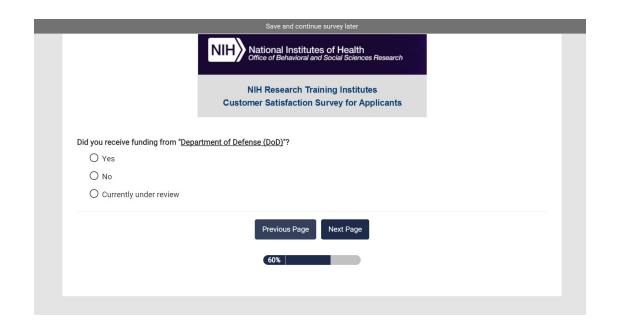
If "yes" to the above item:

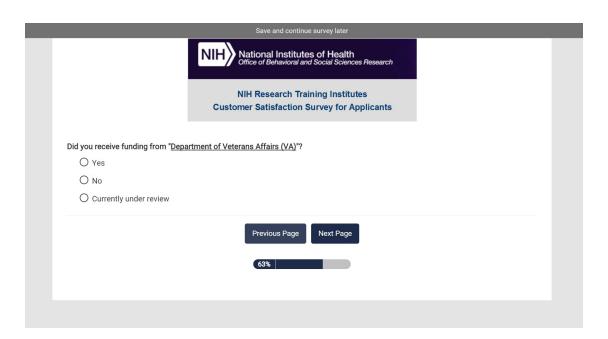


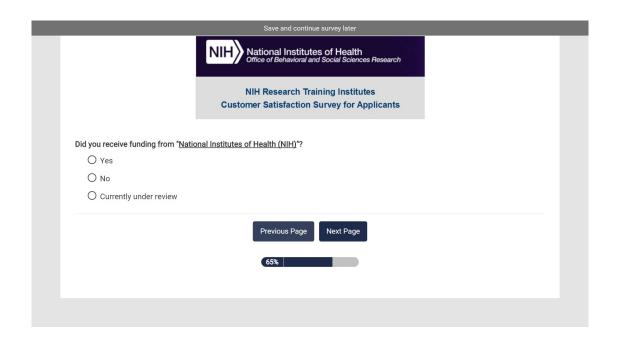
The following items are shown if selected in above question:

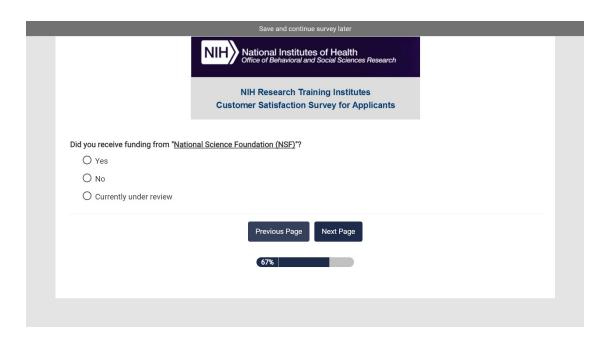


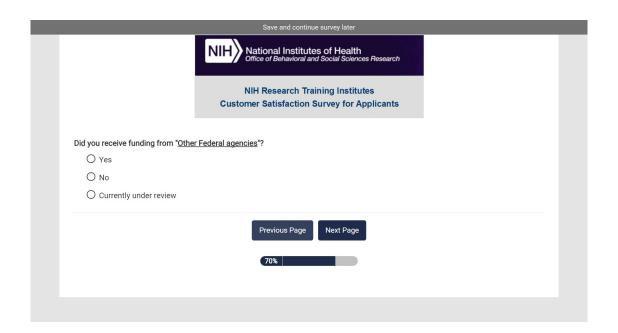


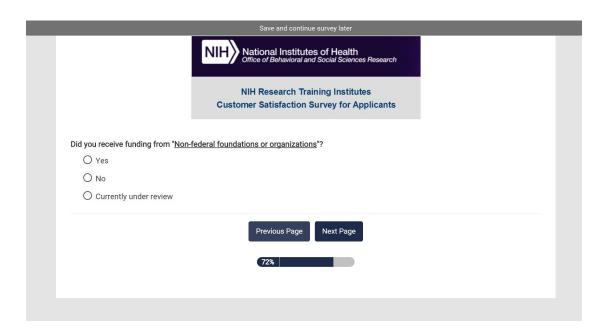


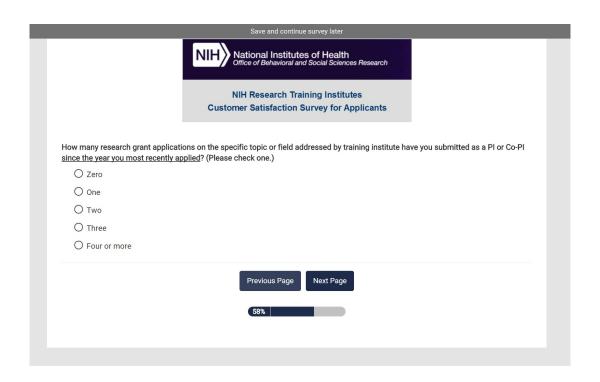


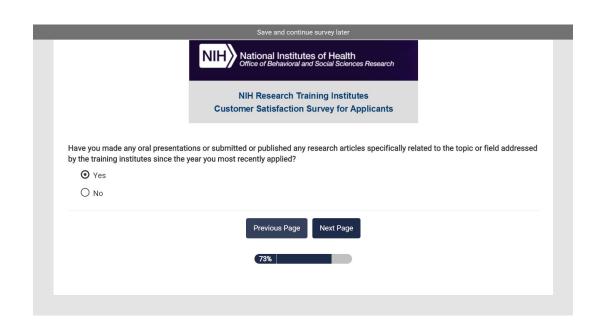




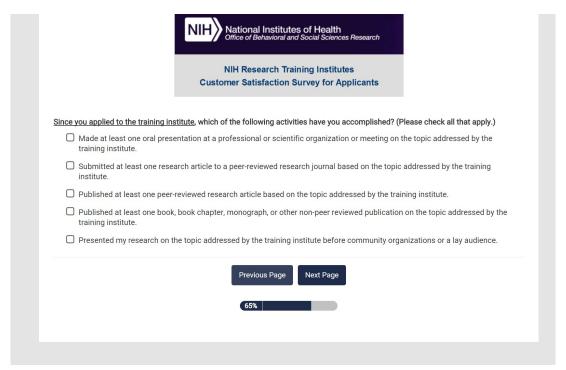


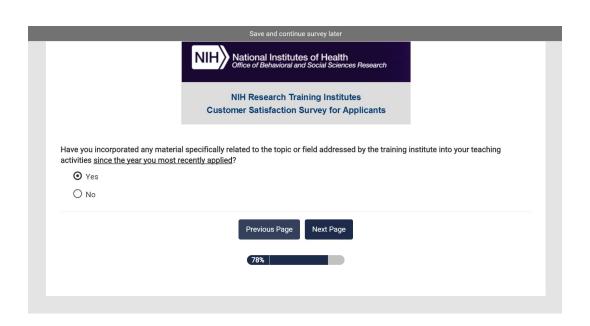




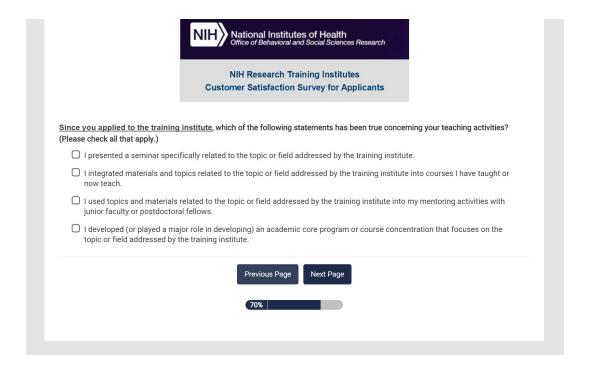


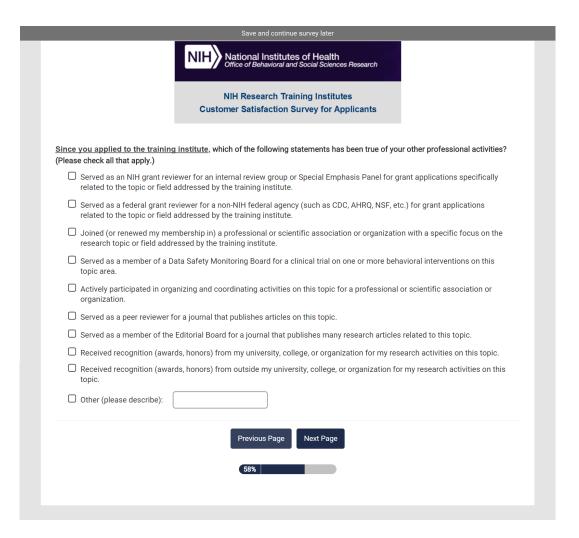
If "yes" to the item above:

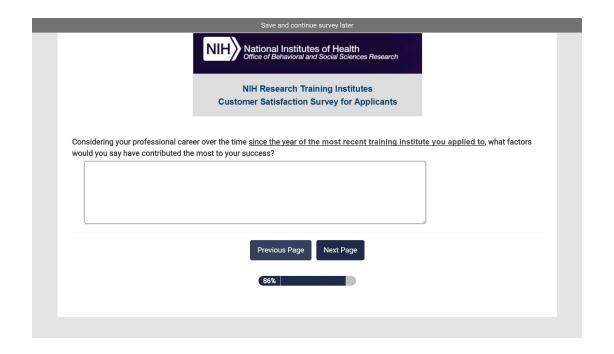




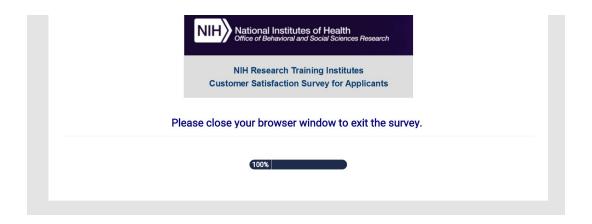
If "yes" to the item above":











Opt-out Thank You Pages:

