

## Attachment 2a – Exit Survey Screenshots

The Exit Survey consists of 2 parts: Part 1 the Alumni Network and Part 2 the Exit Feedback Survey about the Training Experience.

### Part 1: Alumni Network Survey

This screenshot shows when a respondent answers the questions and submits.

The “OMB Burden Statement” is to the right of the “Welcome” message.

When the trainee clicks the link, the screenshot to the right is shown.

Black box indicates a person’s name that has been blacked out.



**OMB Burden Statement**  
OMB NO.: 0925-0046  
Expiration Date: 7/31/2019

Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. The information collected in this study will be kept private to the extent provided by law. Names and other identifiers will not appear in any report. Information you provide will be used to maintain an alumni network for the NCI Center for Cancer Training. You are being asked to complete the alumni survey so you can be a part of the alumni network and will receive information from NCI periodically.

Public reporting burden for this collection of information is estimated to average 5 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, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0046). Do not return the completed form to this address.



Welcome. We are interested in learning about your experience as a trainee. We will use the information we collect to assess and improve our fellowship programs. There are two parts to this survey: Part 1 is a way to join our [alumni network](#); Part 2 will [assess your experience](#) as a trainee and responses are only reported in aggregate. Information completed in Part 2 will be kept private, to the extent provided by law.

OMB No.:0925-0046  
Expiration Date :7/31/2019  
OMB Burden Statement

**ALUMNI INFORMATION**

**Contact and Other Information**

Please provide your contact and next position information so that you can be included in the NCI Trainee Alumni Network.

Full Name:  Preferred Name:  Personal Email:

Are you willing to be contacted for future NCI Alumni events?  
 Yes  No

If you are going to school/doing additional training, is it for:  
 Master Degree  
 Doctoral Degree  
 Medical Degree  
 Clinical Training  
 Not Applicable  
 Other

If you have taken a new job, at what type of organization will you be working?  
 Academia  
 Government  
 Industry/For-Profit  
 Not-for-profit  
 Not Applicable  
 Other Sector(please specify)

New Position title: (Enter N/A if not applicable)

What duties will your job include? Please mark all that apply.

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Clinical                | <input type="checkbox"/> Communications     |
| <input type="checkbox"/> Consulting     | <input type="checkbox"/> Intellectual Property   | <input type="checkbox"/> Project Management |
| <input type="checkbox"/> Policy         | <input type="checkbox"/> Research                | <input type="checkbox"/> Teaching           |
| <input type="checkbox"/> Not Applicable | <input type="checkbox"/> Other (Please specify): |   |

Is there anything that you would like to share with your training director about your experience at NCI?

maximum characters:3000



# Part 1: Alumni Network

This screenshot appears if a respondent declines to answer the questions.

The screenshot shows a survey form from the National Cancer Institute (NIH) titled "Individual Development Plan (IDP)". A modal dialog box titled "Decline to Answer" is overlaid on the form. The dialog box contains the text: "Are you sure you'd like to skip this section? We would greatly appreciate the information in order to track outcomes for NCI alumni." Below this text are two buttons: "Return to Survey" and "Proceed to Next Section".

The background survey form includes the following sections:

- ALUMNI INFORMATION**
- Contact and Other Information**
  - Please provide your contact and next position information so that you can be included in the NCI Trainee Alumni Network.
  - Full Name:
  - Preferred Name:
  - Personal Email:
- Are you willing to be contacted for future NCI Alumni events?
  - Yes  No
- If you are going to school/doing additional training, is it for:
  - Master Degree
  - Doctoral Degree
  - Medical Degree
  - Clinical Training
  - Not Applicable
  - Other
- If you have taken a new job, at what type of organization will you be working?
  - Academia
  - Government
  - Industry/For-Profit
  - Not-for-profit
  - Not Applicable
  - Other Sector(please specify)
- New Position title: *(Enter N/A if not applicable)*
- What duties will your job include? Please mark all that apply.
  - Administrative
  - Consulting
  - Policy
  - Not Applicable
  - Clinical
  - Intellectual Property
  - Research
  - Other (Please specify):
  - Communications
  - Project Management
  - Teaching
- Is there anything that you would like to share with your training director about your experience at NCI?  
  
maximum characters 3000

At the bottom right of the form, there are two buttons: "Decline to Answer" and "Submit".

All respondents receive the pop-up message below.

The image shows a screenshot of the National Cancer Institute (NCI) Electronic Individual Development Plan (eIDP) System. A pop-up message is displayed in the center, titled "Leaving the NCI Electronic Individual Development Plan System (eIDP) System". The message reads: "You are now leaving the NCI Electronic Individual Development Plan System (eIDP). You will be automatically redirected to fill out an anonymous exit survey. If you are not redirected within 20 seconds, please click here to be redirected to <https://idp-dev.cancer.gov/idp/survey/exitSurveyConf>."

The background shows the NCI logo and the text "NATIONAL CANCER INSTITUTE Individual Development Plan(IDP)". Below the logo, there is a welcome message: "Welcome. We are interested in your feedback and improve our fellowship. There are two parts to this survey. Your responses as a trainee and responses are only reported in aggregate."

The main section is titled "ALUMNI INFORMATION" and "Contact and Other Information". It asks for contact and next position information so that you can be included in the NCI Trainee Alumni Network. The form includes fields for "Full Name:", "Preferred Name", and "Personal Email".

Below these fields, there are several questions with radio and checkbox options:

- Are you willing to be contacted for future NCI Alumni events?  
 Yes  No
- If you are going to school/doing additional training, is it for:  
 Master Degree  
 Doctoral Degree  
 Medical Degree  
 Clinical Training  
 Not Applicable  
 Other
- If you have taken a new job, at what type of organization will you be working?  
 Academia  
 Government  
 Industry/For-Profit  
 Not-for-profit  
 Not Applicable  
 Other Sector(please specify)

There is a text field for "New Position title: (Enter N/A if not applicable)".

Below that, there is a question: "What duties will your job include? Please mark all that apply." with the following options:  
 Administrative  
 Consulting  
 Policy  
 Not Applicable  
 Clinical  
 Intellectual Property  
 Research  
 Other (Please specify):  
 Communications  
 Project Management  
 Teaching

At the bottom, there is a question: "Is there anything that you would like to share with your training director about your experience at NCI?" with a text area and a character count "maximum characters 3000".

At the bottom right, there are two buttons: "Decline to Answer" and "Submit".