**IES Fellows Entry Survey**

Welcome to IES! Thank you for taking this survey. Your responses are extremely important to us as we seek to ensure that the IES Education Research training programs attract a diverse group of fellows and provide training experiences that are individualized based on fellows’ interests and professional goals. The results of the survey will be used to both improve the training programs as well as to provide information on the fellows to policymakers, practitioners, and the public.

 Please note that responses are voluntary and all information is kept confidential.

*Information collected from this survey is subject to the confidentiality and data protection requirements of the Institute of Education Sciences (The Education Sciences Reform Act of 2002, Title I, Part E, Section 183). Information that could identify an individual or institution will be separated from the survey responses submitted, kept in secured locations, and destroyed as soon as they are no longer required. Survey responses will be used only for research purposes. The reports prepared from the survey will summarize findings across individuals and institutions and will not associate responses with a specific district, school, or person.*

**I. Respondent Background**

1. Name (Optional) **[open field: 200 characters]**
2. Alternative email address (Optional) **[open field: 200 characters]**

**[Predocs only, questions 3-9]**

1. Home department (e.g., psychology, education, sociology) **[open field: 200 characters]**
2. Program/concentration (e.g., cognitive psychology, education policy, curriculum & instruction) **[open field: 200 characters]**
3. Date of entry into doctoral program (month/year) **[open field: 200 characters]**
4. Dissertation advisor/Primary mentor **(if identified) [open field: 200 characters]**
5. Date of entry into IES Predoctoral Education Research Training Program (month/year): **[open field: 200 characters]**
6. Number of years that you were promised support by your training program: **[open field: 200 characters]**
7. If you received another fellowship, who was it from (e.g., your department, university, private foundation)? **[open field: 200 characters]**

**[Postdocs only, questions 1-6]**

1. Primary mentor in IES postdoctoral training program **[open field: 200 characters]**

1. At which university did you complete your doctoral work? **[open field: 200 characters]**
2. What department did you receive your Ph.D./Ed.D. training in? **[open field: 200 characters]**
3. Who was your graduate school dissertation advisor? **[open field: 200 characters]**
4. Degree completed [ ]  Ph.D. [ ]  Ed.D. [ ]  Other. Please specify:
5. Year degree completed **[open field: 200 characters]**

**II. IES Fellowship Program**

1. How did you find out about this fellowship?

[ ]  From the fellowship program (website, program materials, trainers, etc.)

[ ]  From a current/former fellow

[ ]  From a university source (other than the fellowship program or fellows)

[ ]  From the Institute of Education Sciences

[ ]  Other

1. Please provide more information about how you initially found out about this program (the specific website, office, person, etc. that mentioned the program). **[open field: 500 words]**
2. What drew you to apply to and accept the IES fellowship? **[open field: 500 words]**
3. What specific training activities do you hope to engage in? **[open field: 500 words]**
4. What are your employment goals? **[open field: 500 words]**
5. If you have any initial questions about IES, your fellowship, or resources IES might have available for fellows, what are they? **[open field: 500 words]**
6. Please share any additional thoughts about yourself that you would like IES to know in order to better assist you. **[open field: 500 words]**
7. If would you like IES staff to follow up with you about either question (6) or (7), please provide your email address below: **[open field: 200 characters]**

**III. Respondent Demographics**

**Please note that all of these data are used strictly for statistical purposes and will not be used otherwise.**

1. Gender: [ ]  Female [ ]  Male [ ]  Choose not to answer
2. Are you a veteran? [ ]  No [ ]  Yes [ ]  Choose not to answer
3. Do you have any physical, cognitive, developmental, or sensory limitations that require accommodations to succeed in your training program?

[ ]  No [ ]  Yes [ ]  Choose not to answer

**[If “No”, skip to II. 5]**

1. Have you requested accommodations from your training program?

[ ]  No [ ]  Yes [ ]  Choose not to answer

1. Citizenship status: [ ]  U.S. Citizen [ ]  U.S. Permanent Resident [ ]  Neither
2. Are you of Hispanic or Latino origin? [ ]  No [ ]  Yes [ ]  Choose not to answer
3. What is your race? (Check one or more)

[ ]  American Indian or Alaska Native [ ]  Asian

[ ]  Black or African American [ ]  Native Hawaiian or other Pacific Islander [ ]  White [ ]  Choose not to answer