

Attachment 17:

NRMN Faculty Core Follow-up Survey



NRMN Mentor Annual Tracking Survey

The National Research Mentoring Network (NRMN) is involved in a large effort funded by the National Institutes of Health (NIH) to support students and faculty in biomedical, behavioral, clinical, and social science research careers. This large effort, the NIH Diversity Consortium, is seeking to understand what programs and strategies can benefit students interested in these careers.

The University of California, Los Angeles (UCLA) will be collecting information about these programs on behalf of the Consortium and NIH.

NRMN has provided UCLA your name and contact information because you have participated in activities that are part of the NIH Diversity Consortium's work. All of the information you provide will be protected and secured to the extent permitted by law.

Through this survey, we will gain understanding of faculty activities, including teaching practices, research, scholarly productivity, and mentoring.

Public reporting burden for this collection of information is estimated to average 25 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-xxxx*). Do not return the completed form to this address.

Back Next Cancel





Thank you for responding to this information request. We would first like to get some information about your recent professional activities.

1. In the past five years, have you been the Principal Investigator of an NIH-

funded research grant?
O No
O Yes
 2. In the past five years, have you been the Principal Investigator of any other extramural (other government, foundation, corporate, or other) research grants? No Yes
3. In the past five years, how many peer-reviewed journal articles have you published?
 0 1 2 - 5 6 or more
4. In the past five years, have you presented at a scientific conference (including posters)?
O No
O Yes
5. Has your research ever been the subject of technology transfer activities (including issued patents, completed licenses, and drug, device, or diagnostic approvals)?
O No
O Yes



A. Faculty Rank and Position
We would like to be sure our information is current about your position.
6. Last year, you told us you were position at institution. Has that changed?No
O Yes
What is your current primary position? (Please indicate all that apply) In school
 Working (including internships and significant volunteer positions) Retired Unemployed, looking for work Otherwise not in labor force
Other (specify):
a. Expected completion date (year):
b. Status:
O Full Time
O Part Time
c. Institution:
d. Major:



e. Paid Employment (check all that apply):
■ Full Time
Part Time
Internship or student placement
Seasonal (full-time or part-time)
No paid employment
Position:
Institution or Company:
f. Is this paid position related to research?
O No
O Yes
g. Is this new job/position considered a promotion or advancement?
O No
O Yes
h. Volunteer
Position:
Institution or Company:
No volunteer position
i. Is this volunteer position related to research?
O No
O Yes



8. During the past year, did you complete any degree or certificate program?
O No
O Yes
If yes, please indicate the following:
a. Degree / certificate:
b. Major / area of study:
c. From which institution or school:
d. Date awarded: MM / YR
9. During the past year, did you apply to any degree or certificate program?
Note: If you completed a program above, please indicate here any other program applications.
O No
O Yes
If yes, please indicate the following:
a. Degree / certificate the program awards:
b. Major / area of study:
c. From which institution or school:
d. Date applied: MM / YR
e. Status of application:
 Accepted and will attend
Accepted and will not attend
 Waitlisted
O Pending
O Not accepted



10. Please attach your most recent academic vita (such as a CV). Upload
O Defer for now
11. To allow us to follow your professional accomplishments, please provide any of the following identifiers that you may have:
a. ORCID
O I do not have one
b. NIH eRA Commons ID
O I do not have one
c. LinkedIn ID
I do not have one
Back Next Cancel



Mentoring

This next section concerns your experiences with mentoring in a variety of contexts.

A mentor is someone who provides guidance, assistance, and encouragement on professional and academic issues. A mentor can be either someone who is more experienced (or senior) than you or someone who is at a level similar to you (a "peer").

A mentee is someone who receives guidance or assistance from a mentor. A mentee can be someone less experienced (or junior) than you or someone who is your peer.

A mentoring relationship can be formal (with a set schedule and perhaps arranged by your institution) or informal.

12. Have you ever regularly mentored students, junior faculty, junior

researchers, or peers on biomedical career or research issues?
O No
O Yes
a. About how many people have you mentored in the past five years?
13. Do you have anyone you currently mentor who is junior to you (students junior faculty, junior researchers)?
O No
O Yes
14. How many different people do you regularly mentor currently? (Enter 0 if you do not mentor anyone in a category.)
a. Undergraduate Students:
b. Graduate Students:
c. Post-docs:
d. Junior faculty or junior researchers:
e. Others:



15. Which of the following do you help your mentees with? (choose all that
 Research, general (e.g. guidance related to finding literature, research techniques, and selecting a research topic) Research, specialized issues (e.g. just on statistics or instrumentation) Educational choices and strategies (e.g., guidance in selecting coursework, further educational opportunities Career planning (e.g. giving advice, helping find opportunities) Personal support (e.g. listening to personal concerns) Other (specify):
16. How did you first connect with your mentees? (choose all that apply)
■ They were assigned by your department or campus
☐ Through a NRMN mentorship program
\square Matched through some other formal program
☐ They sought you out independently
☐ Other (specify):
17. How do you usually communicate with your mentees? In-person Phone/Skype Email/Text Other (specify):
18. On average, how often do you usually communicate with your mentees about their research?
Weekly or more often
O Monthly
Several times a year
Annually or less
19. For the two mentees with whom you work most closely on your research, please use the following private weblink to provide the name and email for those mentees. Weblink will not allow anyone to view the name or email address. Information will be used to email a request to these mentees to complete a brief survey regarding their mentored experience. Mentee name and email are only available to our research office if the mentee elects to respond to the email request by going to the website and completing the survey. Their information will be deleted from the system after 3 months if they do not respond to the requests to participate.



20. Do you have anyone you currently mentor who is at a similar career level to yours (a peer)?			
O No			
O Yes			
21. How many different peers do you mentor currently?			
22. Which of the following do you help your peers with? (choose all that apply)			
Research issues			
 Social and emotional needs, e.g. sharing concerns about career and work-life balance 			
Tangible help, e.g. advice about faculty colleagues and teaching, help with writing			
Networking assistance, e.g. helping you meet other people in your field			
\square Career planning (e.g. giving advice, helping find opportunities)			
Other (specify):			
23. How did you first connect with these peers? (choose all that apply)			
☐ They were assigned by your department or campus			
☐ Through a NRMN mentorship program			
■ Matched through some other formal program			
■ They sought you out independently			
Other (specify):			
24. How do you communicate with your peer mentees? In-person			
O Phone/Skype			
Email/TextOther (specify):			
Care (Specify).			





25. On average, how often do you usually communicate with these peer about their research?
Weekly or more often
Monthly
O Several times a year
Annually or less
26. For the two peers whom you mentor most, please use the following private weblink to provide the name and email for those mentees. Weblink will not allow anyone to view the name or email address. Information will be used to email a request to these mentees to complete a brief survey regarding their mentored experience. Mentee name and email are only available to our research office if the mentee elects to respond to the email request by going to the website and completing the survey. Their information will be deleted from the system after 3 month if they do not respond to the requests to participate. Link Back Next Cancel



27. Do you have a faculty member or someone else who is more senior than you who you currently consider a mentor?		
O No		
O Yes		
28. How many different mentors do you regularly work with?		
29. Which of the following does your primary mentor help you with? (choose all that apply)		
 Research, general (e.g. guidance related to finding literature, research techniques, and selecting a research topic) 		
 Research, specialized issues (e.g. just on statistics or instrumentation) 		
Educational choices and strategies (e.g., guidance in selecting coursework, further educational opportunities		
Career planning (e.g. giving advice, helping find opportunities)		
Personal support (e.g. listening to personal concerns)		
☐ Other (specify):		
30. How did you find this mentor?		
They were assigned by your department or campus		
Through NRMN		
Matched through some other formal program		
O You sought out your mentor independently		
Other (specify):		
31. How do you communicate with your primary mentor? (Choose all that apply)		
O In-person		
Phone/SkypeEmail/Text		
Other (specify):		



32. How often do you usually communicate with your primary mentor about your research?			
Weekly or more often			
Monthly			
Several times a year			
 Annually or less 			
33. Do you have someone at a similar educational level as you (i.e. a peer) who you currently consider a mentor?			
O No			
O Yes			
34. How many different peer mentors do you have?			
35. Which of the following do your primary peer mentors help you with? (choose all that apply)			
■ Research issues			
Social and emotional needs e.g. sharing concerns about career and work-life balance			
Tangible help (e.g. advice about faculty colleagues and teaching, help with writing)			
 Networking assistance (e.g. helping you meet other people in your field) 			
■ Career planning (e.g. giving advice, helping find opportunities)			
Other (specify):			
Back Next Cancel			



36.	How did you find this primary mentor?
0	They were assigned by your department or campus
\bigcirc	Through NRMN
0	Matched through some other formal program
0	You sought out your mentor independently
0	Other (specify):
37.	How do you usually communicate with your primary peer mentor? In-person
0	Phone/Skype
0	Email/Text
0	Other (specify):
	How often do you usually communicate with your primary peer ntor?
0	Weekly or more often
0	Monthly
0	Several times a year
0	Annually or less
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Professional Development

39. In the past year, have you participated in any training not through NRMN to improve your skills as a mentor?
Since we last contacted you on date, have you participated in any training not through NRMN to improve your skills as a mentor?
O No
O Yes
a. Type of training (Select all that apply)
■ In-person
lacksquare On-line that occurs in scheduled, real-time method (synchronous)
 On-line or other virtual that you can take at any time that provides feedback or interaction with others (asynchronous)
■ Self-study (by any means, but no interaction or feedback)
Other (Specify):
b. Approximately how many hours was your training over the past year?
hours



	In the past year, have you participated in any training not through NRMN nprove your skills as a mentee?		
	Since we last contacted you on date, have you participated in any training not through NRMN to improve your skills as a mentee?		
0	No		
0	Yes		
C.	Type of training (Select all that apply)		
	In-person		
	On-line that occurs in scheduled, real-time method (synchronous)		
	On-line or other virtual that you can take at any time that provides feedback or interaction with others (asynchronous)		
	Self-study (by any means, but no interaction or feedback)		
	Other (Specify):		
d.	Approximately how many hours was your training over the past year? hours		





41. Have you completed formal training/workshops related to your career or
research (minimum of at least 4 hours cumulative duration) in addition to those
offered by NRMN?
offered by fixing:
O No

O Yes

If yes, please indicate the focus of the training:

		Yes	No
a.	On NIH funding?	0	0
b.	On other funding?	0	0
C.	On biomedical career development (e.g., training in leadership, teaching, mentoring, publishing, gaining tenure, etc.)?	0	0
d.	On other biomedical research related topics?	0	0

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Research, Grants, and Career Activity

42. Below is a list of all grants and submissions you have provided to us in the past.

Since you last provided us with information, have you applied for any additional grant funding or other financial support for your research (either as Principal Investigator or as Co-Investigator or other paid position) that is not on the list OR has the status of previous submissions changed?

) NO
) Yes
13. Please complete or update information for each grant or proposal:
a. Funding Agency Type:
O NIH
Other federal (e.g. NSF)
Nonfederal governmental
Nonprofit (e.g. foundations)
O For-profit
Other (specify):
o. Full grant number if available
c. Agency/Foundation/Company Name:
d. Role:
Principal Investigator
O Co-PI
Investigator
Other (specify):



e.	You	ur percent effort: % or calendar months
f.	Su	bmission status:
	0	Submitted (first time for this proposal)
	0	Re-submitted with revisions
	0	Not funded
	0	NIH Impact score (if applicable):
	0	Funded
		NIH Impact score (if applicable):
g.	Pro	oject Title:
h.	An	nual direct cost (average across all years) :
	0	Less than \$50,000
	0	\$50,000-\$99,999
	0	\$100,000-\$249,999
	0	\$250,000-\$499,999
	0	\$500,000 or more
į.	. S	tart Date (e.g., 07/08/2015) / / /
j	. Е	nd Date (e.g., 07/08/2016) / / /
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k.	Gr	ant funding mechanism:
	\bigcirc	K (any type)
	\bigcirc	P (any type)
	0	R01
	0	R03 or R21
	0	Other R series
	0	T (any type)
	0	U (any type)
	0	Other (e.g., supplements, etc) (specify):
l.	Wł	nat was the main purpose of the funding?
	0	Research
	0	Training of others (e.g., students, peers, workforce)
	0	Your career development
	0	Other (specify):
	Bac	k Next Cancel



44. abo	Have you conducted research that is not covered by the grants listed ve?
0	No Yes
	TCS
a.	What type of research was this? (select all that apply)
	Literature review, synthesis of existing knowledge, and/or conceptual
	Analysis of existing (secondary) data
	Analysis of data you collect (primary analysis)
С	. What was your role? (select all that apply)
	PI /Co-PI or Project Lead
	Investigator
	Other (Specify):
Ва	ack Next Cancel





 45. Do you have any peer-reviewed publications accepted, in-press, or published in the past year? This may include peer-reviewed abstracts included in conference proceedings. No Yes
Below is a list of publications you have provided to us in the past.
Do you have any peer-reviewed publications that you have had accepted to add to this list? This may include peer-reviewed abstracts included in conference proceedings. O No O Yes
If yes, please answer the following questions:
a. PMID # if available:
b. List all Authors (Last FM, comma separated):,,,
c. Title:
d. Journal Name:
e. Year Published (or indicate "in press" or "epub ahead"):
f. Volume:
g. Issue:
h. Page Numbers:
i. DOI or URL for epubs:
46. Are there other scientific publications of yours to add to this list? (e.g. book chapters, books, reports, non-peer reviewed journal articles, working papers, other)
O No
O Yes



a. Publication Type:
Chapter
Book
Other, specify:
b. List all Authors (Last FM, comma separated):
Complete the applicable information below depending on publication type:
c. Book/Anthology Title:
d. Chapter Title :
e. Editors:
f. Year Published:
g. Edition:
h. Publisher:
i. City:
j. State:
k. Page Numbers:
I. DOI or URL for epubs:
Back Next Cancel



47. Have you presented at a scientific conference in the last year (including posters)?	
O No	
O Yes	
48. Please provide information about any of your technology transfer activities.	
Below is a list of technology transfer activities (including issued patents, completed licenses, and drug, device, or diagnostic approvals you have provided to us in the past.	
Please review the list. Are there any to add to this list?	
O No	
O Yes	
a. Please enter a title and brief description for each Technology Activity:	
New patent issued	
O License completed	
O Drug, device, or diagnostic received regulatory approval	
Result of basic research commercialized	
Other (specify):	



49. In the past year, have you been formally recognized, honored, or awarded in recognition of your teaching, research, or other professional activity?	
O No	
O Yes	
If yes, please list any honors or awards you received in the past year in recognition of your teaching, research, or other professional activity:	
50. Have you held office in any professional organization in the past year?	
O No	
O Yes	
If yes, please list any offices you have held in professional organizations in the past year:	



51. Have you provided service to any federal agencies (e.g. reviewer for NIH/ NSF/CDC or similar proposals, member of federal agency advisory council, etc.) in the past year?
O No
O Yes
If yes, please list any service to federal agencies you have performed in the past year (e.g. reviewer for NIH/NSF/CDC or similar proposals, member of federal agency advisory council, etc.):
52. Have you provided service to any non-federal agencies such as state agencies or foundations in the past year?
O No
O Yes
If yes, please list any service to non-federal agencies you have performed in the past year:
Back Next Cancel