Mentored Mock Review Survey – Screenshots

Overview

This document contains screenshots of each page within the Mentored Mock Review Evaluation survey. The page header containing the survey title is repeated on each page. To save space in this document, the header is omitted from Figures 2 - 12. The OMB number and expiration date are displayed at the top of the survey launch page (Figure 1), before the respondent accesses the first question in the survey.

Page Screenshots

OMB No.: 092 Expiration Date: 03/3	
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 reviewi 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 burdet estimate or any other aspect of this collection of information, including suggestions for reducing this burdet to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0642). Do not return the completed form to this address.	-
Mentored Mock Review Evaluation	
Thank you for taking the time to provide your feedback regarding your Mentored Mock Review (MMF experience. The information you provide will remain secure to the extent permitted by law – no indi responses will be shared with any CRCHD staff and your responses are not associated with your nar information will be reported in aggregate and will be used to make improvements to the MMR in fut sessions as appropriate and possible. If you have any questions you may contact Fred Snyder, Senior Evaluation Researcher, at fsnyder@novaresearch.com.	vidual ne. All ure
By continuing with this survey, you agree to participate in the evaluation of the MMR session.	
Click here to launch the Mentored Mock Review Evaluation	

Figure 1. Survey launch page, with OMB information.

I was a (p	lease select one):		
RevieweObserve			

Next Question

Figure 2. Attendee Type Question

For each of the following questions, select the response option that best indicates the extent to which you agree or disagree with the statement.

Previous Question

Next Question

Figure 3. Survey Instructions Information Element

I have a better understanding of the NIH peer review process.	
 Strongly Agree Agree Disagree Strongly Disagree 	
 Prefer not to Answer Previous Question 	Next Question

Figure 4. Evaluation Question 1

I have a better understanding of the NIH research grant review scoring system.	
 Strongly Agree Agree Disagree Strongly Disagree 	
Prefer not to Answer Previous Question	Next Question
	Next Question

Figure 5. Evaluation Question 2

I have a greater understanding of the NIH research grant review criteria.	
 Strongly Agree Agree Disagree Strongly Disagree 	
Prefer not to Answer	
Previous Question	Next Question

Figure 6. Evaluation Question 3

I am better prepared to review and provide an adequate critique of a research grant application.	
 Strongly Agree Agree Disagree Strongly Disagree 	
Prefer not to Answer	
Previous Question Next Question	on

Figure 7. Evaluation Question 4

Participating in the Mock Review as a Reviewer will help me write my own research grant application	n.
 Strongly Agree Agree Disagree 	
 Strongly Disagree Prefer not to Answer 	
Previous Question Next Qu	lestion

Figure 8. Evaluation Question 5 with Reviewer wording

Participating in the Mock Review as an Observer will help me write my own research grant application.
 Strongly Agree Agree Disagree Strongly Disagree
Prefer not to Answer
Previous Question Next Question

Figure 9. Evaluation Question 5 with Observer wording

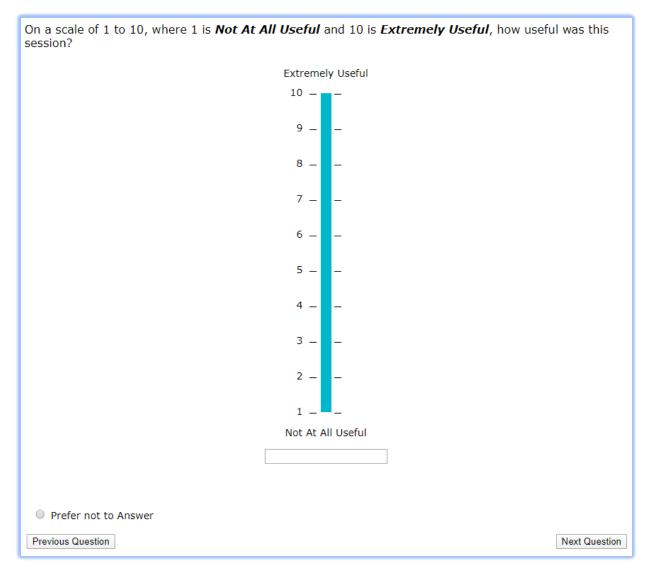


Figure 10. Evaluation Question 6

How could this session have been improved?	
Prefer not to Answer	
Previous Question	Submit

Figure 11. Evaluation Question 7



Thank you for taking the time to provide feedback.