

# 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.: 0925-0642  
Expiration Date: 03/31/2023

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 (0925-0642). 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 (MMR) experience. The information you provide will remain secure to the extent permitted by law – no individual responses will be shared with any CRCHD staff and your responses are not associated with your name. All information will be reported in aggregate and will be used to make improvements to the MMR in future sessions as appropriate and possible. If you have any questions you may contact Fred Snyder, Senior Evaluation Researcher, at [fsnyder@novaresearch.com](mailto:fsnyder@novaresearch.com).

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 (please select one):

Reviewer

Observer

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

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

Figure 7. Evaluation Question 4

Participating in the Mock Review as a Reviewer will help me write my own research grant application.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
  
- Prefer not to Answer

Previous Question

Next Question

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.

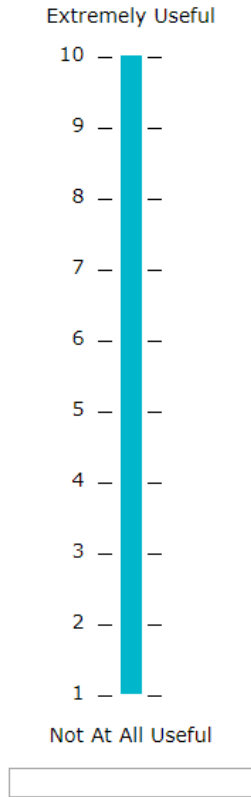
- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
  
- Prefer not to Answer

Previous Question

Next Question

Figure 9. Evaluation Question 5 with Observer wording

On a scale of 1 to 10, where 1 is **Not At All Useful** and 10 is **Extremely Useful**, how useful was this session?



Prefer not to Answer

Previous Question

Next Question

Figure 10. Evaluation Question 6

How could this session have been improved?

Prefer not to Answer

Previous Question

Submit

Figure 11. Evaluation Question 7

**Survey Complete!**

**Thank you for taking the time to provide feedback.**

Figure 12. Survey Complete Screen