GRADUATE SUMMER OPPORTUNITIES IN ADVANCED RESEARCH (G-SOAR) - ALUMNI TRACKING

OMB Clearance Number: 0925-0299
Expiration Date: 30-Jun-2022

GENERAL INFORMATION

First Name (Forename; Given Name):

Last Name (Surname; Family Name):

Personal Email Address (check accuracy):

Permanent Phone Number (check accuracy):

G-SOAR PARTICIPATION INFORMATION

G–SOAR Participation Year:

NIH Institute–Center:

NIH Campus Location:

NIH Investigator:

What was the most helpful thing you learned from your internship at NIH?

MASTER UNIVERSITY INFORMATION

Complete if you were or are enrolled in a Master's Degree program.

MS Degree – University Name:

MS Degree – School / College Name:

MS Degree – Start State

September | 18 | 2018

MS Degree – Graduation Date:

September | 18 | 2018

MS Degree – Thesis Title:

GRADUATE UNIVERSITY
Complete if you were or are enrolled in a Doctoral Degree program.

Graduate University

[   ]

Graduate School / College Name:

[   ]

Graduate University Start Date:

[September ⬍] [18 ⬍] [2018 ⬍]

Graduate University Graduation Date:

[September ⬍] [18 ⬍] [2018 ⬍]

Graduate Degree Awarded:

[⬍]

Graduate Dissertation Title:

[   ]

CAREER DEVELOPMENT

What is your current professional status?

[enrolled in a training program   ⬍]

Which programs have you applied for admission?

[   ]

Which programs have you been awarded?

[   ]

Provide information about your training program (non-degree program):

~ Training Program - Company:

[   ]

~ Training Program - Mentor:

[   ]

~ Training Program - Status:

[   ]

~ Training Program - Dates:

[   ]

~ Training Program - Description of Research:

[   ]

What is your long-term career goal (5-years or 10-years beyond graduation):

[   ]

Submit Survey   Cancel