

OITE CAREERS BLOG - SUCCESS STORIES

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

| First Name (Given Name; Forename): | |
|--|--|
| Last Name (Family Name; Surname): | |
| Email Address (check accuracy): | |
| Current Organization: | |
| Current Job Title: | |
| Location: | |
| How long have you been in your current job?: | |
| Who was your NIH advisor?: | |
| Institute-Center: | |
| What was your trainee position while at the NIH? (select all that apply) | |
| □ summer intern | |
| postbaccalaureate | |
| graduate student | |
| medical / dental student | |
| postdoctorate | |
| clinical fellow | |
| research fellow | |
| What did you do as an NIH trainee?: | |
| | |
| What are the most important skills that you utilize in your current position?: | |
| | |
| What is your favorite aspect of your current job?: | |
| | |

What has been the hardest aspect about your transitioning into this position? What are some of the challenges you faced?:

| What was your job search like? | |
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| How did you come to choose this as your next st | ep?: |
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| // | |
| | |
| What are the most important soft skills needed f | or your position?: |
| | |
| | |
| | |
| 77 | |
| How did you prepare for the interview?: | |
| now did you prepare for the interviews. | |
| | |
| | |
| | |
| | |
| Any last bits of advice? If you had to do your sea | rch differently what would you change? |
| This last bits of davice. If you had to do your set | ich umerendy, what would you change. |
| | |
| | |
| | |
| | |
| Submit Survey Cancel | |

Collection of this information is authorized by The Public Health Service Act, Section 410 (42 USC 285). Rights of participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. The information collected in this study will be kept private to the extent provided by law. Names and other identifiers will not appear in any report of the study. Information provided will be combined for all participants and reported as summaries.

Public reporting burden for this collection of information is estimated to average 45 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 (0925–0299). Do not return the completed form to this address.

