

Fellows Survey 2020

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* Required

Demographics

1. 1. What is your gender/gender identity? *

Mark only one oval.

- Female
 Male
 Prefer not to say

2. 2. Are you a US citizen or Permanent Resident? *

Mark only one oval.

- Yes
 No
 Prefer not to answer

3. 3. Which of these best describes your ethnicity (choose one)? *

Mark only one oval.

Hispanic or Latino

Not Hispanic or Latino

4. 4. Which of these best describes your race (choose one or more)?

Check all that apply.

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

5. 5. What is your current position in DCEG? *

Mark only one oval.

Post-baccalaureate fellow: Post Bachelor's or Master's degree

Predoctoral fellow: Doctoral candidate

Postdoctoral fellow: 1st or 2nd year

Postdoctoral fellow: 3rd year and beyond

Research fellow / Clinical fellow

Prefer not to answer

Other: _____

6. 6. What are your current career goals? You can select up to three options. *

Check all that apply.

- NIH Intramural
- NIH Extramural
- Non-profit organization
- Policy
- Industry (of-profit)
- Academia
- Other government agency (e.g., FDA, EPA, etc.)
- Non-US Government agencies
- International agencies (Outside the US)

Mentorship

7. 1. How often do you receive feedback from your mentor on your research progress?

*

Mark only one oval.

- At least once per week
- Once every other week
- Once per month
- Less often than once per month
- Prefer not to answer

8. 2. How often would you like to receive feedback from your mentor on your research progress? *

Mark only one oval.

- At least once per week
- Once every other week
- Once per month
- Less often than once per month
- Prefer not to answer

9. 3. How often do you receive feedback from your mentor on your professional development? *

Mark only one oval.

- At least once per week
- Once every other week
- Once per month
- Less often than once per month
- Prefer not to answer

10. 4. How often would you like to receive feedback from your mentor on your professional development? *

Mark only one oval.

- At least once per week
- Once every other week
- Once per month
- Less often than once per month
- Prefer not to answer

11. 5. Do you feel comfortable sharing your career goals with your mentor? *

Mark only one oval.

- Yes
- No
- Prefer not to answer

12. 6a. How would you rate the level of research mentoring you are currently receiving from your primary mentor(s)? (This question is not required, only answer if you want to)

Mark only one oval.

	1	2	3	4	5	
Very Unsatisfactory	<input type="radio"/>	Excellent				

13. 6b. If you have another mentor, how would you rate the level of research mentoring you are currently receiving from any additional formal mentor(s)?

Mark only one oval.

	1	2	3	4	5	
Very Unsatisfactory	<input type="radio"/>	Excellent				

14. 7a. How would you rate the level of career mentoring you are currently receiving from your primary mentor(s)? (This question is not required, only answer if you want to)

Mark only one oval.

	1	2	3	4	5	
Very unsatisfactory	<input type="radio"/>	Excellent				

15. 7b. If you have another mentor, how would you rate the level of career mentoring you are currently receiving from any additional formal mentor(s)?

Mark only one oval.

	1	2	3	4	5	
Very unsatisfactory	<input type="radio"/>	Excellent				

16. 7c. How would you rate the level of career mentoring you are currently receiving from the Office of Education? (This question is not required, only answer if you want to)

Mark only one oval.

	1	2	3	4	5	
Very unsatisfactory	<input type="radio"/>	Excellent				

17. 8. Do you have anything to add regarding mentoring related to research progress or career development?

18. 9. My mentor(s) provides me with constructive suggestions to improve my job performance.

Mark only one oval.

	1	2	3	4	5	
Strongly Disagree	<input type="radio"/>	Strongly Agree				

19. 10. I know what is expected of me on the job.

Mark only one oval.

	1	2	3	4	5	
Strongly Disagree	<input type="radio"/>	Strongly Agree				

20. 11. I have enough information to do my job well.

Mark only one oval.

	1	2	3	4	5	
Strongly Disagree	<input type="radio"/>	Strongly Agree				

21. 12. My mentor(s) supports my need to balance work and other life issues.

Mark only one oval.

	1	2	3	4	5	
Strongly Disagree	<input type="radio"/>	Strongly Agree				

22. 1. What are your favorite things about being a fellow in DCEG?

23. 2. What kind of challenges/difficulties have you encountered as a fellow in DCEG?

24. 3. Name one or more areas within DCEG which could be improved to make your training better or your life easier.

Wellness and Personal Comfort

25. 1. Within DCEG, have you ever been made uncomfortable because of your gender, gender identity, sexual orientation, race, religion, or other personal qualities (use Other to describe/comment)? *

Check all that apply.

- Yes
 No
 Prefer not to answer

Other: _____

26. 2. Within DCEG, have you ever observed others being made uncomfortable because of their gender, gender identity, sexual orientation, race, religion, or other personal qualities (use Other to describe/comment)? *

Check all that apply.

- Yes
 No
 Prefer not to answer

Other: _____

27. 3. Do you feel like you have the tools to deal with personal challenges (Select all that apply, if you are missing a specific tool please describe in Other)?

Check all that apply.

- Yes
 No
 I would like more tools

Other: _____

28. 4a. Do you know about the OITE Small Group Discussions hosted at Shady Grove?

Mark only one oval.

- Yes, and I have participated in them
- Yes, but I have not participated in them
- No

29. 4b. If you have participated in the OITE Small Group Discussions hosted at Shady Grove, did you find them helpful?

30. 4c. If you have participated in the OITE Small Group Discussions hosted at Shady Grove, are there any additional topics you would like to see covered in the discussion series?

31. 5a. Have you ever been made or witnessed others being made uncomfortable because of your/their junior status or lack of scientific background?

Mark only one oval.

- Yes
 No
 Prefer not to answer

32. 5b. If you answered Yes to 5a, please describe below.

33. 6. Do you feel respected in DCEG (use Other to describe any instances in which you did not feel respected)?

Check all that apply.

- Yes
 No
 Prefer not to answer

Other: _____

34. 7. Would you be interested in participating in a monthly DCEG Fellow discussion group, hosted by the Office of Education, with a focus on fellow-related challenges and conflict management?

Mark only one oval.

- Yes
- No
- Maybe
- Other: _____

Questions About Other Fellow Activities

35. 1. When you arrived, did anyone speak to you about your branch/lab data use and storage policies?

Mark only one oval.

- Yes
- No

36. 2. If yes, how did you get this information?

37. 3. If no, how did you get this information?

38. 4. Please provide additional comments about data use and storage policies here (if any).

39. 5. Do you feel like you have the means and ability to travel to where you would like to go (in terms of conference travel)?

Mark only one oval.

Yes

No

40. 6. Do you know that fellows are eligible for travel advances for conference travel? These financial advances allow fellows to receive 60% of their out-of-pocket travel expenses 1-2 weeks prior to their scheduled travel.

Mark only one oval.

Yes

No

Additional Comments

41. Please use this space to provide any additional comments regarding the topics covered in the survey or other topics.

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