# Fellowship Management System (FMS)

# **FMS Activity Tracking Module**

## **Privacy Act and Public Burden Information**

#### **Privacy Act Information**

The Privacy Act applies to this information collection. Information collected will be kept private as noted in the System of Records Notice is 09-20-0112, *Fellowship Program and Guest Researcher Records*.

**Public Burden Information** 

Form Approved OMB No. <u>0920-0765</u> Exp. Date <u>01/31/2021</u>

Public reporting burden of this collection of information is an estimated average of 25 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 CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0765).

2020

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## 1. Introduction

The purpose of this document is to list all the data elements collected online through the Fellowship Management System (FMS). The FMS activity tracking module is a streamlined mechanism for Centers for Disease Control and Prevention (CDC) fellow, program associates and host site supervisors to submit information online and track statuses of fellowship progression (e.g., CALs, competencies). The FMS is a robust flexible framework and the FMS Activity Tracking Module is tailored successfully for various CDC fellowships:

- 1. Epidemic Intelligence Service (EIS)
- 2. CDC E-learning Institute (ELI)
- 3. Epidemiology Elective Program (EEP)
- 4. Future Leaders in Infections and Global Health Threats (FLIGHT)
- 5. Laboratory Leadership Service (LLS)
- 6. CDC Steven M. Teutsch Prevention Effectiveness (PE) Fellowship
- 7. Public Health Associate Program (PHAP)
- 8. Public Health Informatics Fellowship Program (PHIFP)
- 9. Science Ambassador Fellowship (SAF)

#### **1.1 Document Structure**

This document is broken down by the major pages of the FMS Activity Tracking. In this document, each page of the FMS Activity Tracker has sections and some sub-sections. Instructions, login, and registration pages are included. Instructions and emails in the FMS Activity Tracker are tailored to each CDC fellowship's requirements.

Following the screenshots in each section is a table that shows the status of the collection of data elements by each CDC fellowships. The following labels indicate the status of the collection:

- "Yes" indicates that the fellowship collects the information and that applicants are required to submit this information.
- "No" indicates that the fellowship does not collect this information.
- "-" indicates open text field

In addition, the table shows the data values of each data element, and for ones that have a list of dropdown values, the data value category is hyperlinked to its list located in the Appendix.

# 2. Sign-In & Sign-Up Pages

## 2.1 Sign-In Page

Figure 2.1-a. Sign-In Page

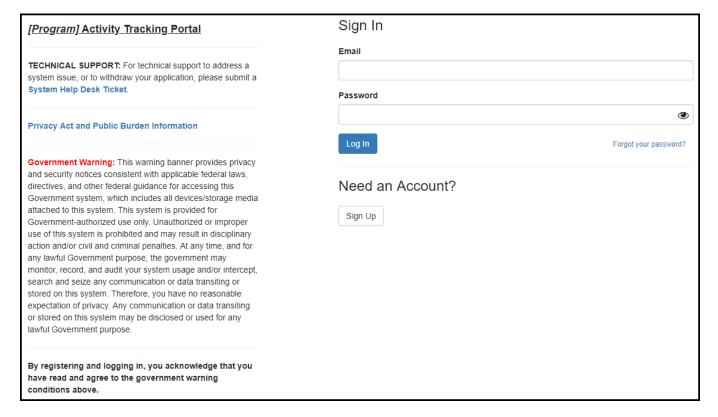


Figure 2.1-b. Privacy Act and Public Burden Information

# CDC Enterprise Fellowship Management System

#### **Privacy Act Information**

The Privacy Act applies to this information collection. Information collected will be kep private as noted in the System of Records Notice is 09-20-0112, Fellowship Program and Guest Researcher Records.

#### **Public Burden Information**

Form Approved OMB No. 0920-0765 Exp. Date 01/31/2021

#### **Activity Tracking Module**

Public reporting burden of this collection of information is an estimated average of 25 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 CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0765).

#### Table 2.1-a. Sign-In Fields

Field	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Email	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Password	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

# 2.2 Sign-Up Page (For New Users)

Figure 2.2-a. Sign-Up Fields

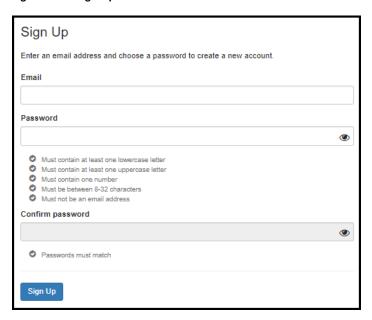


Table 2.2-a. Sign-Up Fields

Field	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Email	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Password	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Confirm Password	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

# 3. eFMS System Help Desk Ticket

Figure 3-a. eFMS System Help Desk Ticket Fields

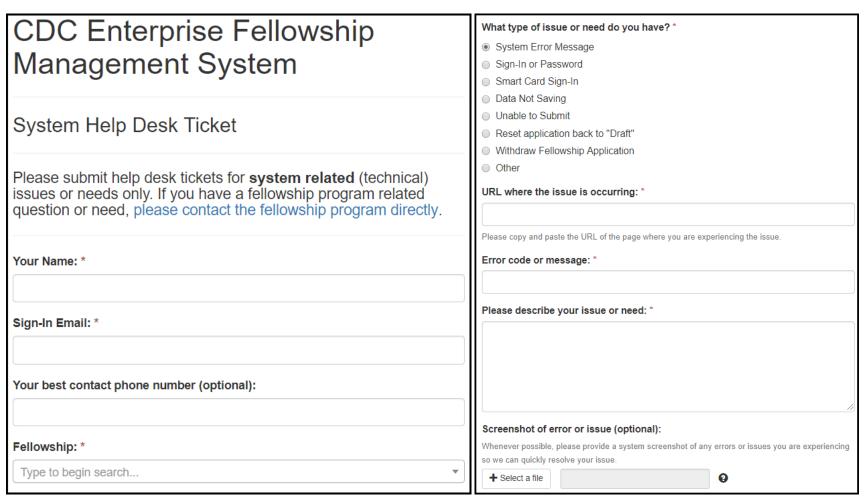
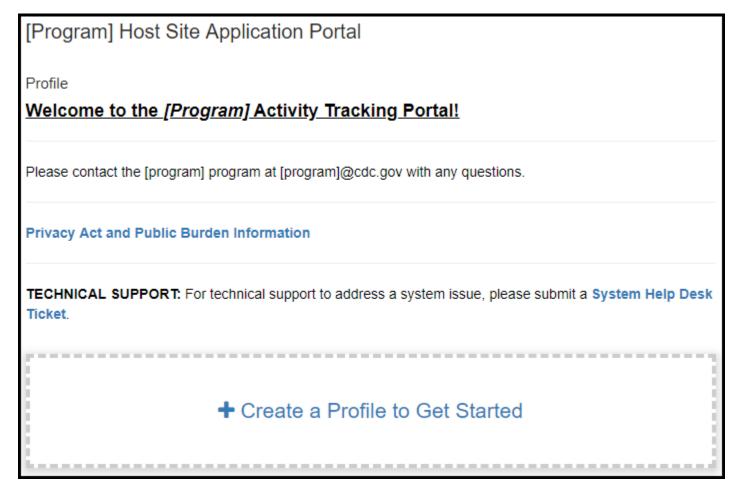


Table 3-a. eFMS System Help Desk Ticket Fields

Field	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Your Name:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Sign-In Email:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Contact Phone Number:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Fellowship:	Fellowship Lookup Table	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
What type of issue or need do you have?	1. System Error Message 2. Sign-In or Password 3. Smart Card Sign-In 4. Data Not Saving 5. Unable to Submit 6. Reset application back to "Draft" 7. Withdraw Fellowship Application 8. Other	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
URL where the issue is occurring:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Error code message:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Please describe your issue or need:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Screenshot of error or issue (optional):	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

# 4. Activity Tracking Welcome Page

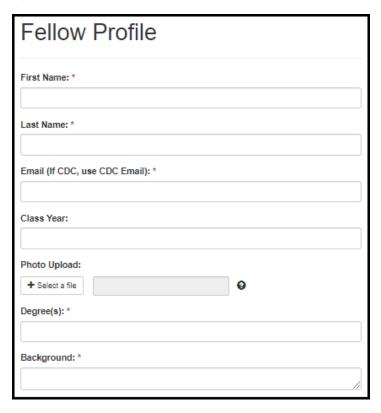
Figure 4-a. Application Welcome Page



# **5. Activity Tracking Profile**

# **5.1 General Information**

Figure 5.1-a. General Information Fields



**Table 5.1-a. General Information Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
First Name:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Last Name:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
CDC Employee?	1. Yes	No	No	No	No	No	No	No	No	Yes
	2. No									
Email (If CDC, use CDC Email):	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Class Year:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Photo Upload:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Degree(s):	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Background:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

## **5.2 EEP**

Inprocessing

#### Figure 5.2-a. EEP Profile Fields

Please note that some items are required by all students while others are only required by CDC or Field Sites*	
CDC Sites include all CDC Campuses: Atlanta (Roybal, Century Center, Chamblee, Corporate Square), Fort Collins, Hyattsville, San Juan, Anchorage, Cincinnati	
Field Sites include National Park Service, Indian Health Service, and local, state, and territorial health departments	
Forms	Inprocessing Training
Memorandum of Agreement (Required for all students):	Safety Survival Skills Exam (SSS) (Required for CDC-based students):
Date Completed: *	□ Completed
Date Completed.	Date Completed: *
669A SWEP Volunteer Agreement (Required for CDC-based students):	
□ Completed	Security Awareness Training (SAT) (Required for CDC-based students):
Date Completed: *	Completed
	Date Completed: *
669C SWEP Statement of Duties Agreement (Required for CDC-based students):	
□ Completed	
Date Completed: *	Procedures
	Completed Office of Safety, Security, and Asset Management (OSSAM) regarding your personnel security background investigation (Required for CDC-based
1438 SWEP E-QIP Initiation Form (Required for CDC-based students):	students):
□ Completed	Completed
Date Completed: *	Date Completed: *
Provided your SSN to EEP Program (Required for CDC-based students):	Fingerprinting (Required for CDC-based students):
□ Completed	□ Completed
Date Completed: *	Date Completed: *
	L

Table 5.2-a. EEP Profile Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Memorandum of Agreement (Required for all	1. Completed	No	No	No	Yes	No	No	No	No	No
students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
669A SWEP Volunteer Agreement (Required	1. Completed	No	No	No	Yes	No	No	No	No	No
for CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
669C SWEP Statement of Duties Agreement	1. Completed	No	No	No	Yes	No	No	No	No	No
(Required for CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
1438 SWEP E-QIP Initiation Form (Required for	1. Completed	No	No	No	Yes	No	No	No	No	No
CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Provided your SSN to EEP Program (Required	1. Completed	No	No	No	Yes	No	No	No	No	No
for CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No

Table 5.2-b. EEP Profile Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Safety Survival Skills Exam (SSS) (Required for	1. Completed	No	No	No	Yes	No	No	No	No	No
CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Security Awareness Training (SAT) (Required	1. Completed	No	No	No	Yes	No	No	No	No	No
for CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Completed Office of Safety, Security, and Asset	1. Completed	No	No	No	Yes	No	No	No	No	No
Management (OSSAM) regarding your										
personnel security background investigation										
(Required for CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Fingerprinting (Required for CDC-based	1. Completed	No	No	No	Yes	No	No	No	No	No
students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No

Figure 5.3-b. EEP Profile Fields

Pre-Arrival Tracking
Principles of Epidemiology for Public Health Practice Course (See program handbook):
□ Completed
Date Completed: *
ActivEpi Course (See program handbook):
□ Completed
Date Completed: *
Online Public Health Ethics Course (See program handbook):
□ Completed
Date Completed: *
End of Rotation Closeout
End of Rotation Closeout Submit Project Abstract (Required by All):
Submit Project Abstract (Required by All):
Submit Project Abstract (Required by All):  Completed
Submit Project Abstract (Required by All):  Completed
Submit Project Abstract (Required by All):  Completed
Submit Project Abstract (Required by All):  Completed  Date Completed: *
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):  Completed
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):  Completed
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):  Completed
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):  Completed  Date Completed: *
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):  Completed  Date Completed: *  Returned computer and all other equipment provided (Required by All):
Submit Project Abstract (Required by All):  Completed  Date Completed: *  Returned CDC SmartCard to Supervisor (Required by CDC):  Completed  Date Completed: *  Returned computer and all other equipment provided (Required by All):  Completed

Table 5.3-c. EEP Profile Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Principles of Epidemiology for Public Health	1. Completed	No	No	No	Yes	No	No	No	No	No
Practice Course (See program handbook)										
(Optional for all students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
ActiEpi Course (See program handbook)	1. Completed	No	No	No	Yes	No	No	No	No	No
(Optional for all students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Online Public Health Ethics Course (See	1. Completed	No	No	No	Yes	No	No	No	No	No
program handbook) (Optional for all students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Submit Project Abstract (Required for all	1. Completed	No	No	No	Yes	No	No	No	No	No
students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Return CDC SmartCard to Supervisor (Required	1. Completed	No	No	No	Yes	No	No	No	No	No
for CDC-based students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No
Return computer and all other equipment	1. Completed	No	No	No	Yes	No	No	No	No	No
provided (Required for all students):										
Date Completed:	-	No	No	No	Yes	No	No	No	No	No

## **5.3 SAF**

Figure 5.3-a. SAF Profile Fields

Inprocessing
Pre-Arrival Tracking
Public Health 101 (See program handbook) *
☐ Completed
Date Completed: *

Figure 5.3-a. SAF Profile Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Public Health 101 (See program handbook)	1. Completed	No	No	No	No	Yes	No	No	No	No
Date Completed:	-	No	No	No	No	Yes	No	No	No	No

# **6. Activities & Projects**

## **6.1 EEP**

## 6.1.1 Project Goals

Figure 6.1.1-a. EEP Project Goal Fields

EEP Activity Tracking Project Goals & Plan	
Project Goals	
Please outline at least 3 goals for your rotation project.	
Goal 1: *	
Competency Targeted: *	
Systems Thinking	
Public Health Sciences	
Analytic Assessment	
Community Dimensions of Practice	
Intercultural Sensitivity	
<ul><li>Communication</li></ul>	
Goal 2: *	
	11
Competency Targeted: *	
Systems Thinking	
Public Health Sciences	
Analytic Assessment	
Community Dimensions of Practice	
Intercultural Sensitivity	
<ul><li>Communication</li></ul>	
Goal 3: *	
Competency Targeted: *	
Systems Thinking	
Public Health Sciences	
Analytic Assessment	
Community Dimensions of Practice	
Intercultural Sensitivity	
Communication	

Table 6.1.1-a. EEP Project Goal Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Goal 1:	-	No	No	No	Yes	No	No	No	No	No

Competency Domain Targeted:	<ol> <li>Systems Thinking</li> <li>Public Health Sciences</li> <li>Analytic Assessment</li> <li>Community Dimensions of Practice</li> <li>Intercultural Sensitivity</li> <li>Communication</li> </ol>	No	No	No	Yes	No	No	No	No	No
Goal 2:	-	No	No	No	Yes	No	No	No	No	No
Competency Domain Targeted:	<ol> <li>Systems Thinking</li> <li>Public Health Sciences</li> <li>Analytic Assessment</li> <li>Community Dimensions of Practice</li> <li>Intercultural Sensitivity</li> <li>Communication</li> </ol>	No	No	No	Yes	No	No	No	No	No
Goal 3:	-	No	No	No	Yes	No	No	No	No	No
Competency Domain Targeted:	<ol> <li>Systems Thinking</li> <li>Public Health Sciences</li> <li>Analytic Assessment</li> <li>Community Dimensions of Practice</li> <li>Intercultural Sensitivity</li> <li>Communication</li> </ol>	No	No	No	Yes	No	No	No	No	No

## 6.1.2 Project Plan

Figure 6.1.2-a. EEP Project Plan Fields

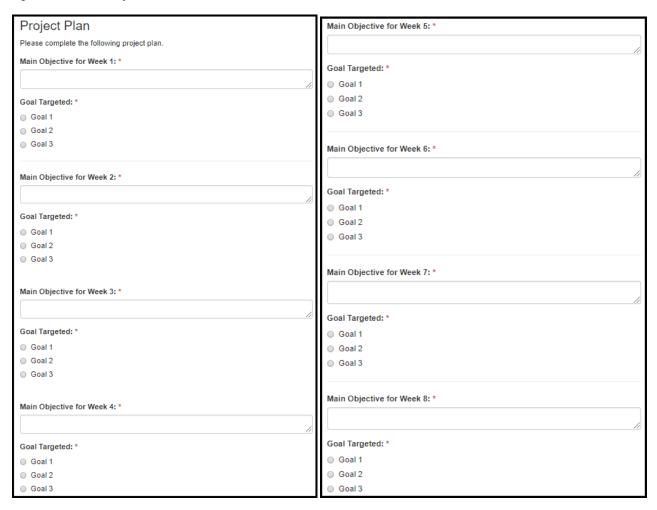
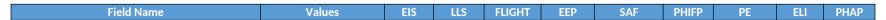


Figure 6.1.2-a. EEP Project Plan Fields



Main Objective for Week 1:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 2:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 3:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 4:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 5:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 6:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 7:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No
Main Objective for Week 8:	-	No	No	No	Yes	No	No	No	No	No
Goal Targeted:	1. Goal 1 2. Goal 2 3. Goal 3	No	No	No	Yes	No	No	No	No	No

# 6.1.3 Project Tracking Form

Figure 6.1.3-a. EEP Project Tracking Form Fields

EEP Activity Tracking Project	
Tracking Form	
Which week are you reporting? *	
Week 1	
Week 2	
© Week 3	
Week 4	
<ul><li>Week 5</li></ul>	
<ul> <li>Week 6</li> </ul>	
<ul> <li>Week 7</li> </ul>	
<ul> <li>Week 8</li> </ul>	
Did you meet your objectives for this week? *	Do you have any field deployment (e.g., Epi Aids) activities to report? *
① Yes	Yes
⊚ No	○ No
How do you plan to address this? *	Please provide as much detail as currently possible: *
Which of the following lectures or trainings did you attend this week? *	Is there any support the Epidemiology Elective Program team can provide you at
EIS Tuesday Monthly Seminar (TMS)	this time? *
Public Health Grand Rounds	Yes
Preventive Medicine Grand Rounds	© No
EIS Regional Conference	
EIS Annual Conference	Please provide as much detail as currently possible: *
Other	
Please provide any additional lectures or trainings attended: *	
	Please note: EEP cannot ensure confidentiality of responses. If you prefer to discuss any potential support in detail, please email EpiElective@cdc.gov.

Table 6.1.3-a. EEP Project Tracking Form Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Which week are you reporting?	1. Week 1 2. Week 2 3. Week 3 4. Week 4 5. Week 5 6. Week 6 7. Week 7 8. Week 8	No	No	No	Yes	No	No	No	No	No
Did you meet your objectives for this week?	1. Yes 2. No	No	No	No	Yes	No	No	No	No	No
How do you plan to address this?	-	No	No	No	Yes	No	No	No	No	No
Which of the following lectures or trainings did you attend this week?	EIS Tuesday Monthly Seminar (TMS)     Public Health Grand Rounds     Preventive Medicine Grand Rounds     EIS Regional Conference     EIS Annual Conference     Other	No	No	No	Yes	No	No	No	No	No
Please provide any additional lectures or trainings attended:	-	No	No	No	Yes	No	No	No	No	No
Do you have any field deployment (e.g., Epi Aids) activities to report?	1. Yes 2. No	No	No	No	Yes	No	No	No	No	No
Please provide as much detail as currently possible:	-	No	No	No	Yes	No	No	No	No	No
Is there any support the Epidemiology Elective Program team can provide you at this time?	1. Yes 2. No	No	No	No	Yes	No	No	No	No	No
Please provide as much detail as currently possible:		No	No	No	Yes	No	No	No	No	No

#### 6.2 SAF

#### **6.2.1** Conference Presentation

Figure 6.2.1-a. Conference Presentation Fields

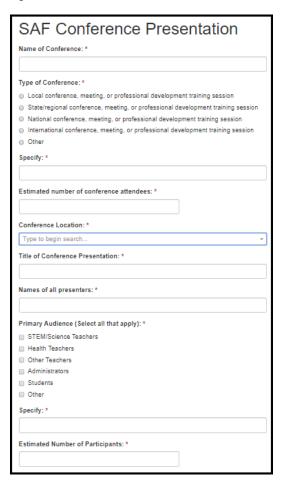


Table 6.2.1-a. Conference Presentation Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Name of Conference:	-	No	No	No	No	Yes	No	No	No	No
Type of Conference:	1. Local conference, meeting, or professional development training session 2. State/regional conference, meeting, or professional development training session 3. National conference, meeting, or professional development training session 4. International conference, meeting, or professional development training session 5. Other	No	No	No	No	Yes	No	No	No	No
Specify:	-	No	No	No	No	Yes	No	No	No	No
Estimated number of conference attendees:	-	No	No	No	No	Yes	No	No	No	No
Conference Location:	State/Territory Lookup	No	No	No	No	Yes	No	No	No	No
Title of Conference Presentation:	-	No	No	No	No	Yes	No	No	No	No
Number of Presenters:	-	No	No	No	No	Yes	No	No	No	No
Primary Audience (Select all that apply):	<ol> <li>STEM/Science Teachers</li> <li>Health Teachers</li> <li>Other Teachers</li> <li>Administrators</li> <li>Students</li> <li>Other</li> </ol>	No	No	No	No	Yes	No	No	No	No
Specify:	-	No	No	No	No	Yes	No	No	No	No
Estimated number of presentation attendees:	-	No	No	No	No	Yes	No	No	No	No

## 6.3 ELI

## 6.3.1 Success Story

Figure 6.3.1-a. Success Story Fields

ELI My Success Story
1. What training did you develop and what is it about? If finalized, please include where it will be listed (URL). $$
2. Why was this training needed? *
3. Tell us about your experience as a fellow in the CDC E-Learning Institute (ELI) Fellowship. *
4. How do you think the fellowship helped you professionally? *
5. What would you say to potential candidates interested in ELI? *

Table 6.3.1-a. Success Story Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
1. What training did you develop and what is it about? If finalized, please include where it will be listed (URL).	-	No	No	No	No	No	No	No	Yes	No
2. Why was this training needed?	-	No	No	No	No	No	No	No	Yes	No
3. Tell us about your experience as a fellow in the CDC E-Learning Institute (ELI) Fellowship.	-	No	No	No	No	No	No	No	Yes	No
4. How do you think the fellowship helped you professionally?	-	No	No	No	No	No	No	No	Yes	No
5. What would you say to potential candidates interested in ELI?	-	No	No	No	No	No	No	No	Yes	No

#### 6.3.2 Photo Release

Figure 6.3.2-a. Photo Release Fields

## Photo Release

I hereby agree to allow my photographic image to be used (with or without my name, both singly and in conjunction with other persons or objects) by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services.

CDC may use my photograph, at its discretion and consistent with its public health mission, in any publication and/or on an Internet web site or in any other format. I understand that other persons will be free to copy and/or print and/or distribute my photographic image.

I understand that this publication may be printed by the United States Government Printing Office and/or posted on the Internet or in any other format by CDC without copyright protection and may be distributed free or sold. I also understand that additional printings or web postings may be conducted by the United States Government Printing Office and CDC in the future.

I understand that for the use of my photographic image in this publication or Internet posting or any other format, I will receive no financial compensation or payment of any kind from the United States Government or from any agency of the Government.

Digital Signature (Your Full Name): \*

#### Table 6.3.2-a. Photo Release Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Digital Signature: (Full Name)	-	No	No	No	No	No	No	No	Yes	No

# 7. Surveys

#### **7.1 EEP**

## 7.1.1 Orientation Survey

#### 7.1.1.1 Introduction & Orientation Experience

Figure 7.1.1.1.a. Introduction & Orientation Experience Fields

# CDC Epidemiology Elective Program Orientation Satisfaction Survey

#### Introduction

Congratulations on being a part of the CDC Epidemiology Elective Program! This orientation satisfaction survey should take less than 5 minutes to complete. This aggregated results of the survey will be used to identify ways to improve future orientations. Answers will not be shared with your supervisor. Please e-mail any questions regarding this survey to epielective@cdc.gov.

#### General Information

Have you previously had at least 6 months of formal public health experience not including post-baccalaureate degrees programs? Both paid and unpaid experiences should be counted. \*

- Yes
- No

#### Please indicate your level of agreement with the following statements. The EEP orientation helped me feel more prepared for my rotation.\* Strongly Disagree Disagree Neither Agree or Disagree Agree Strongly Agree The EEP orientation provided a useful introduction to the CDC, its mission, and Strongly Disagree Disagree Neither Agree or Disagree Agree Strongly Agree was satisfied with the EEP orientation schedule. Strongly Disagree Disagree Neither Agree or Disagree Agree Strongly Agree was satisfied with the types of sessions offered during EEP orientation. \* Strongly Disagree Disagree Neither Agree or Disagree

Orientation Experience

Agree

Strongly Agree

Table 7.1.1.1.a. Introduction & Orientation Experience Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Have you previously had at least 6 months of formal public health experience not including post-baccalaureate degrees programs? Both paid and unpaid experiences should be counted.	1. Yes 2. No	No	No	No	Yes	No	No	No	No	No
The EEP orientation helped me feel more prepared for my rotation.	1. Strongly Disagree 2. Disagree 3. Neither Agree or Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No
The EEP orientation provided a useful introduction to the CDC, its mission, and the work of its various centers.	Strongly Disagree     Disagree     Neither Agree or Disagree     Agree     Strongly Agree	No	No	No	Yes	No	No	No	No	No
I was satisfied with the EEP orientation schedule.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
I was satisfied with the types of sessions offered during EEP orientation.	1. Strongly Disagree 2. Disagree 3. Neither Agree or Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No

#### 7.1.1.2 Orientation Curriculum

Figure 7.1.1.2.a. Orientation Curriculum Fields

	What is your opinion of the balance of lecture and interactivity in the EEP orientation? *						
	Too much lecture and not enough interactive learning						
	Right amount of both lecture and interactive learning						
	Too much interactive learning and not enough lecture						
	Do you think you will use what you learned in the EEP orientation in your EEP assignment? $^{\star}$						
	Not applicable—I did not learn anything new from this training						
	Definitely not						
	Probably not						
	Possibly						
Orientation Curriculum	Probably yes						
	Definitely yes						
Please rate your satisfaction with the orientation sessions.	Why do you think you may not use what you learned in the EEP orientation in						
Please comment on which sessions were the most helpful in terms of best	your EEP assignment? (Check all that may apply) *						
preparing you for the start of your EEP rotation: *	The training content was not relevant to my assignment.						
4	The training content was too general. I need additional training on my assignment subject matter.						
Please comment on which sessions were the least helpful in terms of best	☐ The training content was too basic.						
preparing you for the start of your EEP rotation and provide any suggestions for improvement: *	☐ The training content was too advanced						
III POTOINGIA	The training content was not relevant to my career trajectory.						
//	□ Other						
What were you hoping to learn in this training that was not covered? *	Specify: *						

**Table 7.1.1.2.a. Orientation Curriculum Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Please comment on which sessions were the most helpful in terms of best preparing you for the start of your EEP rotation:	-	No	No	No	Yes	No	No	No	No	No
Please comment on which sessions were the least helpful in terms of best preparing you for the start of your EEP rotation and provide any suggestions for improvement:	-	No	No	No	Yes	No	No	No	No	No
What were you hoping to learn in this training that was not covered?	-	No	No	No	Yes	No	No	No	No	No
What is your opinion of the balance of lecture and interactivity in the EEP orientation?	1. Too much lecture and not enough interactive learning 2. Right amount of both lecture and interactive learning 3. Too much interactive learning and not enough lecture	No	No	No	Yes	No	No	No	No	No
Do you think you will use what you learned in the EEP orientation in your EEP assignment?	1. Not applicable—I did not learn anything new from this training 2. Definitely not 3. Probably not 4. Possibly 5. Probably yes 6. Definitely yes	No	No	No	Yes	No	No	No	No	No
Why do you think you may not use what you learned in the EEP orientation in your EEP assignment? (Check all that may apply)	1. The training content was not relevant to my assignment. 2. The training content was too general. I need additional training on my assignment subject matter. 3. The training content was too basic. 4. The training content was too advanced 5. The training content was not relevant to my career trajectory. 6. Other	No	No	No	Yes	No	No	No	No	No
Please specify:	-	No	No	No	Yes	No	No	No	No	No

## **7.1.1.3** Future Considerations

Figure 7.1.1.3.a. Future Consideration Fields

Future Considerations
Please indicate your level of agreement with the following statements:
I am considering pursuing a public health career. *
Strongly Disagree
O Disagree
Neither Agree or Disagree
O Agree
Strongly Agree
I am considering pursuing additional public health training (i.e., other fellowships) *
Strongly Disagree
Disagree
Neither Agree or Disagree
O Agree
Strongly Agree
I am considering pursuing additional public health degrees (e.g., DrPH, PhD, MPH, or MSPH) or a preventative medicine residency. *
Strongly Disagree
Disagree
Neither Agree or Disagree
O Agree
Strongly Agree
Please provide any additional comments.

Table 7.1.1.3.a. Future Consideration Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
I am considering pursuing a public health career.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
I am considering pursuing additional public health training (i.e., other fellowships)	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
I am considering pursuing additional public health degrees (e.g., DrPH, PhD, MPH, or MSPH) or a preventative medicine residency.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Please provide any additional comments.	-	No	No	No	Yes	No	No	No	No	No

# 7.1.1.4 Getting Started

Figure 7.1.1.4.a. Getting Started Fields

Getting Started
All Students
Did you received your computer? *
Yes
○ No
When did you receive your computer? *
When do you expect to receive your computer? *
This week
Next week
Not sure
CDC Students Only
Did you receive your SmartCard? *
Yes
○ No
When did you receive your SmartCard?*
When do you plan to obtain your SmartCard? *
This week
Next week
Not sure
Please confirm that the email provided in your Profile is current and permanent:
I confirm that the email on my Profile is current and permanent

Table 7.1.1.4.a. Getting Started Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Did you receive your computer?	1. Yes	No	No	No	Yes	No	No	No	No	No
	2. No									
When did you receive your computer?	-	No	No	No	Yes	No	No	No	No	No
When do you expect to receive your	1. This week	No	No	No	Yes	No	No	No	No	No
computer?	2. Next week									
	3. Not sure									
Did you receive your SmartCard?	1. Yes	No	No	No	Yes	No	No	No	No	No
	2. No									
When did you receive your SmartCard?	-	No	No	No	Yes	No	No	No	No	No
When do you expect to receive your	1. This week	No	No	No	Yes	No	No	No	No	No
SmartCard?	2. Next week									
	3. Not sure									
Please confirm that the email provided	1. I confirm that the email on my	No	No	No	Yes	No	No	No	No	No
in your Profile is current and permanent:	Profile is current and permanent									

# 7.1.2 Student Exit Survey

# 7.1.2.1 Main Project and Supervisor

Figure 7.1.2.1.a. Main Project and Supervisor Fields

Main Project and Supervisor
How would you best classify the main project that you worked on? (Select up to three) *
□ Data collection
□ Data entry
□ Data analysis
☐ Intervention/program planning
■ Intervention/program implementation
☐ Intervention/program evaluation
☐ Literature review
<ul> <li>Scientific writing (e.g., drafting a section of a report)</li> </ul>
□ Communications/design (e.g., developing flyers, website content)
Field investigation (e.g., Epi Aid)
□ Other
Specify: *
Please give a title to the project even if you do not have one (e.g., Evaluation of antihypertensive medication compliance among US adults, 2010-2016). If you had more than one main project, please give titles to all projects.  What was the title of your main project? *
What deliverables (e.g., literature review, 1-page flyer, clean data set, presentation) did you complete for your main project? *

Table 7.1.2.1.a. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
How would you best classify the main	1. Data collection	No	No	No	Yes	No	No	No	No	No
project that you worked on? (Select up	2. Data entry									
to three)	3. Data analysis									
	4. Intervention/program planning									
	5. Intervention/program									
	implementation									
	6. Intervention/program evaluation									
	7. Literature review									
	8. Scientific writing (e.g., drafting a									
	section of a report)									
	9. Communications/design (e.g.,									
	developing flyers, website content)									
	10. Field investigation (e.g., Epi Aid)									
	11. Other									
Specify:	-	No	No	No	Yes	No	No	No	No	No
What was the title of your main project?	-	No	No	No	Yes	No	No	No	No	No
What deliverables (e.g., literature	-	No	No	No	Yes	No	No	No	No	No
review, 1-page flyer, clean data set,										
presentation) did you complete for your										
main project?										

Figure 7.1.2.1.b. Main Project and Supervisor Fields

Was the timeframe of your rotation appropriate for you to complete your deliverable? *
<ul><li>Yes, it was appropriate.</li><li>No, it was too short.</li><li>No, it was too long.</li></ul>
Please select any of the future roles that you may have related to your main project: (Select all that apply)
Being an author on a report or manuscript
Giving a presentation
<ul> <li>Supporting the team with further data analysis</li> </ul>
□ Other
Specify: *

Table 7.1.2.1.b. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Was the timeframe of your rotation appropriate for you to complete your deliverables?	<ol> <li>Yes, it was appropriate.</li> <li>No, it was too short.</li> <li>No, it was too long.</li> </ol>	No	No	No	Yes	No	No	No	No	No
Please select any of the future roles that you may have related to your main project: (Select all that apply)	Being an author on a report or manuscript     Giving a presentation     Supporting the team with further data analysis     Other	No	No	No	Yes	No	No	No	No	No
Specify:	-	No	No	No	Yes	No	No	No	No	No

Figure 7.1.2.1.c. Main Project and Supervisor Fields



Table 7.1.2.1.c. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Data collection:	-	No	No	No	Yes	No	No	No	No	No
Data entry:	-	No	No	No	Yes	No	No	No	No	No
Data analysis:	-	No	No	No	Yes	No	No	No	No	No
Intervention/program planning:	-	No	No	No	Yes	No	No	No	No	No
Intervention/program implementation:	-	No	No	No	Yes	No	No	No	No	No
Intervention/program evaluation:	-	No	No	No	Yes	No	No	No	No	No
Literature review:	-	No	No	No	Yes	No	No	No	No	No
Scientific writing (e.g., drafting a section of a report):	-	No	No	No	Yes	No	No	No	No	No
Communications/design (e.g., developing flyers, website content):	-	No	No	No	Yes	No	No	No	No	No
Field investigation (e.g., Epi Aid):	-	No	No	No	Yes	No	No	No	No	No
Other: Administrative duties	-	No	No	No	Yes	No	No	No	No	No
Other: Meetings	-	No	No	No	Yes	No	No	No	No	No
Other: Strategic planning	-	No	No	No	Yes	No	No	No	No	No

Figure 7.1.2.1.e. Main Project and Supervisor Fields



Table 7.1.2.1.e. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Other 1: (Please specify)	-	No	No	No	Yes	No	No	No	No	No
Other 1: %	-	No	No	No	Yes	No	No	No	No	No
Other 2: (Please specify)	-	No	No	No	Yes	No	No	No	No	No
Other 2: %	-	No	No	No	Yes	No	No	No	No	No

Figure 7.1.2.1.f. Main Project and Supervisor Fields

What did your supervisor do to enhance your EEP experience? (Select all that apply)
<ul> <li>Discussed my assignment with me before starting the program</li> </ul>
■ Provided an overview of CDC and how our Center/Division fits into CDC's mission
■ Met with me each week to provide any feedback
□ Connected me with other professionals
■ Facilitated my participation in professional or educational activities within CDC
□ Other
Specify: *
Would you recommend your supervisor to future EEP students? *
① Yes
○ No
Please explain why not. Your response will be kept confidential. *
Select the number of training opportunities you attended during your elective rotation: *
0 0
0 1-4
0 5-9
10 or more

Table 7.1.2.1.f. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
What did your supervisor do to enhance your EEP experience? (Select all that apply)	1. Discussed my assignment with me before starting the program 2. Provided an overview of CDC and how our Center/Division fits into CDC's mission 3. Met with me each week to provide any feedback 4. Connected me with other professionals 5. Facilitated my participation in professional or educational activities within CDC 6. Other	No	No	No	Yes	No	No	No	No	No
Specify:	-	No	No	No	Yes	No	No	No	No	No
Would you recommend your supervisor to future EEP students?	1. Yes 2. No	No	No	No	Yes	No	No	No	No	No
Please explain why not. Your response will be kept confidential.	-	No	No	No	Yes	No	No	No	No	No
Select the number of training opportunities you attended during your elective rotation:	1. 0 2. 1-4 3. 5-9 4. 10 or more	No	No	No	Yes	No	No	No	No	No

Figure 7.1.2.1.g. Main Project and Supervisor Fields

EEP communications provided useful information for additional training and networking opportunities. *
O Agree
O Disagree
Neither
Did you assist in a field investigation (e.g., an Epi-Aid)? *
O Yes
○ No
I was not on call for an Epi-Aid
What CDC Center/Institute/Office conducted the field investigation (e.g., Epi-Aid)? (Select all that apply) $^{\star}$
□ Center for Global Health (CGH)
■ National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)
<ul> <li>National Center for Environmental Health/Agency for Toxic Substances and Disease Registry (NCEH/ATSDR)</li> </ul>
■ National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)
■ National Center for Injury Prevention and Control (NCIPC)
<ul> <li>National Institute for Occupational Safety and Health (NIOSH)</li> </ul>
☐ Indian Health Service (IHS)
■ National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)
■ National Center for Health Statistics (NCHS)
■ National Center for Immunization and Respiratory Diseases (NCIRD)
■ National Center on Birth Defects and Developmental Disabilities (NCBDDD)
Division/Branch: *
Location of Investigation: *
Type to begin search ▼

Table 7.1.2.1.g. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
EEP communications provided useful	1. Agree	No	No	No	Yes	No	No	No	No	No
information for additional training	2. Disagree									
and networking opportunities.	3. Neither									
Did you assist in a field investigation	1. Yes	No	No	No	Yes	No	No	No	No	No
(e.g., an Epi-Aid)?	2. No									
What CDC Center/Institute/Office	Center/Division/Branch Lookup	No	No	No	Yes	No	No	No	No	No
conducted the field investigation										
(e.g., Epi-Aid)? (Select all that apply)										
Division/Branch:	-	No	No	No	Yes	No	No	No	No	No
Location of Investigation:	State Lookup	No	No	No	Yes	No	No	No	No	No

Figure 7.1.2.1.h. Main Project and Supervisor Fields

Briefly describe your responsibilities in the field investigation (e.g., Epi Aid): *
Please indicate your level of agreement with the following statements:
Participation in a field investigation (e.g., Epi-Aid) increased my understanding of public health concepts through hands-on experience. *
Strongly Disagree
O Disagree
Neither Agree or Disagree
Agree
Strongly Agree
Participation in a field investigation (e.g., Epi-Aid) increased my interest in pursuing a public health career. *
Strongly Disagree
Disagree
Neither Agree or Disagree
Agree
Strongly Agree
Participation in a field investigation (e.g, Epi-Aid) connected me with additional public health professionals. *
Strongly Disagree
Disagree
Neither Agree or Disagree
○ Agree
Strongly Agree

Table 7.1.2.1.h. Main Project and Supervisor Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Briefly describe your responsibilities in the field investigation (e.g., Epi Aid):	-	No	No	No	Yes	No	No	No	No	No
Participation in a field investigation (e.g., Epi-Aid).  Epi-Aid) increased my understanding of public health concepts through hands-on experience.	Strongly Disagree     Disagree     Neither Agree or Disagree     Agree	No	No	No	Yes	No	No	No	No	No
	5. Strongly Agree									
Participation in a field investigation (e.g., Epi-Aid) increased my interest in pursuing a public health career.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Participation in a field investigation (e.g, Epi-Aid) connected me with additional public health professionals.	1. Strongly Disagree 2. Disagree 3. Neither Agree or Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No

### 7.1.2.2 Competencies

#### Figure 7.1.2.2.a. Competency Fields

# Competencies

In the following section, please rate yourself on the following competencies before and after participating in EEP. Refer to the guide below to determine your competency level. Note that most projects focus on 1-3 domains (e.g., Community Dimensions of Practice, Communication), so you may not have a change in every competency.

#### Entry/Novice

This level is characterized by:

- · Developing awareness of topic
- Limited capabilities
- · Little or no experience
- · Little or no awareness of potential problems
- · Little or no awareness of questions to ask

#### Proficient/Skilled

This level is characterized by:

- · Applying knowledge routinely
- · Basic capabilities
- · Moderate amount of experience
- . Solving problems as they arise
- · Awareness of questions to ask
- . Knowing where and how to access resources to answer questions

#### Mastery/Expert

This level is characterized by:

- · Applying knowledge effectively, confidently
- · Advanced capabilities
- · Extensive experience
- · Anticipating problems before they arise
- · Being sought out for guidance
- · Innovating or improving practices for the benefit of others

Figure 7.1.2.2.b. Competency Fields

Community Dimension of Practice	After EEP
Before EEP	Collaborate in research and intervention efforts to improve global, national,
Collaborate in research and intervention efforts to improve global, national, state, and local health and wellbeing. *	state, and local health and wellbeing. *  No experience
No experience	Beginner
Beginner	Competent
Competent	Proficient
Proficient	Expert
Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	Incorporate ethical principles as the basis of all interactions with organizations,
Incorporate ethical principles as the basis of all interactions with organizations,	communities, and individuals. *
communities, and individuals. *	No experience
No experience	Beginner
Beginner	O Competent
Competent	Proficient
Proficient	Expert
Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	
Illustrate how ethical principles play a role in the planning and execution of public health activities. *	Illustrate how ethical principles play a role in the planning and execution of public health activities. *
No experience	No experience
Beginner	Beginner
Competent	Competent
Proficient	Proficient
Expert	Expert
I did not focus on this competency during my rotation	I did not focus on this competency during my rotation

Table 7.1.2.2.a. Competency Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Collaborate in research and intervention	1. No experience	No	No	No	Yes	No	No	No	No	No
efforts to improve global, national, state,	2. Beginner									
and local health and wellbeing.	3. Competent									
	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Incorporate ethical principles as the	1. No experience	No	No	No	Yes	No	No	No	No	No
basis of all interactions with	2. Beginner									
organizations, communities, and	3. Competent									
individuals.	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Illustrate how ethical principles play a	1. No experience	No	No	No	Yes	No	No	No	No	No
role in the planning and execution of	2. Beginner									
public health activities.	3. Competent									
	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									

Figure 7.1.2.2.b. Competency Fields

Analytical Assessment	After EEP
Before EEP	Use methods and instruments for collecting valid and reliable quantitative and qualitative data.*
Use methods and instruments for collecting valid and reliable quantitative and qualitative data. *	No experience
No experience	Beginner
Beginner	Competent
Competent	Proficient
Proficient	Expert
Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	Apply epidemiology and biostatistics concepts to analyze quantitative or
Apply epidemiology and biostatistics concepts to analyze quantitative or qualitative public health data. *	qualitative public health data. *
	No experience
No experience     Regiment	Beginner
Beginner     Commented	Competent
Competent     Professional	Proficient
Proficient     Funct	Expert
Expert     I did not focus on this competency during my rotation	I did not focus on this competency during my rotation
Use public health data from epidemiologic studies to make evidence-based decisions for action. *	Use public health data from epidemiologic studies to make evidence-based decisions for action. *
No experience	No experience
Beginner	Beginner
Competent	Competent
Proficient	Proficient
Expert	Expert
I did not focus on this competency during my rotation	I did not focus on this competency during my rotation

Table 7.1.2.2.b. Competency Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Use methods and instruments for	1. No experience	No	No	No	Yes	No	No	No	No	No
collecting valid and reliable quantitative	2. Beginner									
and qualitative data.	3. Competent									
	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Apply epidemiology and biostatistics	1. No experience	No	No	No	Yes	No	No	No	No	No
concepts to analyze quantitative or	2. Beginner									
qualitative public health data.	3. Competent									
	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Use public health data from	1. No experience	No	No	No	Yes	No	No	No	No	No
epidemiologic studies to make evidence-	2. Beginner									
based decisions for action.	3. Competent									
	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									

## Figure 7.1.2.2.c. Competency Fields

Intercultural Sensitivity	After EEP
Before EEP	Describe how demographic, cultural, socioeconomic, religious/spiritual, and
Describe how demographic, cultural, socioeconomic, religious/spiritual, and behavioral factors affect the health of individuals and communities in global,	behavioral factors affect the health of individuals and communities in global, national, state, and local contexts. *
national, state, and local contexts. *	No experience
No experience	Beginner
O Beginner	Competent
O Competent	Proficient
O Proficient	Expert
Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	Discuss how attitudes and perceptions affect health-related behaviors, both in
Discuss how attitudes and perceptions affect health-related behaviors, both in familiar contexts and when attitudes and perceptions are unfamiliar given one's	familiar contexts and when attitudes and perceptions are unfamiliar given one's own socialization. *
own socialization.*	No experience
No experience	Beginner
O Beginner	O Competent
O Competent	Proficient
O Proficient	Expert
© Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	
Explain how demographic, cultural, socioeconomic, religious/spiritual, and behavioral factors are taken into consideration when tailoring public health programs and initiatives to improve impact. *	Explain how demographic, cultural, socioeconomic, religious/spiritual, and behavioral factors are taken into consideration when tailoring public health programs and initiatives to improve impact. *
No experience	No experience
O Beginner	Beginner
Competent	Competent
O Proficient	O Proficient
O Expert	O Expert
I did not focus on this competency during my rotation	<ul> <li>I did not focus on this competency during my rotation</li> </ul>

Table 7.1.2.2.c. Competency Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Describe how demographic, cultural,	1. No experience	No	No	No	Yes	No	No	No	No	No
socioeconomic, religious/spiritual, and	2. Beginner									
behavioral factors affect the health of	3. Competent									
individuals and communities in global,	4. Proficient									
national, state, and local contexts.	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Discuss how attitudes and perceptions	1. No experience	No	No	No	Yes	No	No	No	No	No
affect health-related behaviors, both in	2. Beginner									
familiar contexts and when attitudes and	3. Competent									
perceptions are unfamiliar given one's	4. Proficient									
own socialization.	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Explain how demographic, cultural,	1. No experience	No	No	No	Yes	No	No	No	No	No
socioeconomic, religious/spiritual, and	2. Beginner									
behavioral factors are taken into	3. Competent									
consideration when tailoring public	4. Proficient									
health programs and initiatives to	5. Expert									
improve impact.	6. I did not focus on this competency									
	during my rotation									

## Figure 7.1.2.2.d. Competency Fields

Systems Thinking	After EEP
Before EEP	Analyze issues related to the burden of disease, socioeconomic, cultural, and
Analyze issues related to the burden of disease, socioeconomic, cultural, and	environmental determinants of health, measures of health status, and the links between health, social and economic development.*
environmental determinants of health, measures of health status, and the links	No experience
between health, social and economic development. *	Beginner
No experience	
O Beginner	Competent
Competent	O Proficient
Proficient	Expert
O Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	Apply a population-based perspective of the distribution and determinants of
Apply a population-based perspective of the distribution and determinants of	disease or health conditions. *
disease or health conditions. *	No experience
No experience	Beginner
O Beginner	Competent
O Competent	Proficient
Proficient	Expert
Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	
Exhibit process-oriented thinking by outlining a project timeline, learning objectives, and expected deliverables. *	Exhibit process-oriented thinking by outlining a project timeline, learning objectives, and expected deliverables. *
No experience	No experience
Beginner	Beginner
Competent	Competent
Proficient	Proficient
O Expert	Expert
I did not focus on this competency during my rotation	I did not focus on this competency during my rotation
Identify inputs (e.g., community resources, public and/or private organizations, institutions, individuals, environment, or materials), their roles in public health interventions, and the manner in which they can be utilized to achieve public health outputs and outcomes.*	Identify inputs (e.g., community resources, public and/or private organizations, institutions, individuals, environment, or materials), their roles in public health interventions, and the manner in which they can be utilized to achieve public health outputs and outcomes. *
No experience	No experience
O Beginner	Beginner
O Competent	Competent
O Proficient	Proficient
O Expert	© Expert
I did not focus on this competency during my rotation	I did not focus on this competency during my rotation

Table 7.1.2.2.d. Competency Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Analyze issues related to the burden of disease, socioeconomic, cultural, and environmental determinants of health, measures of health status, and the links between health, social and economic development.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No
Apply a population-based perspective of the distribution and determinants of disease or health conditions.	<ol> <li>No experience</li> <li>Beginner</li> <li>Competent</li> <li>Proficient</li> <li>Expert</li> <li>I did not focus on this competency during my rotation</li> </ol>	No	No	No	Yes	No	No	No	No	No
Exhibit process-oriented thinking by outlining a project timeline, learning objectives, and expected deliverables.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No
Identify inputs (e.g., community resources, public and/or private organizations, institutions, individuals, environment, or materials), their roles in public health interventions, and the manner in which they can be utilized to achieve public health outputs and outcomes.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No

#### Figure 7.1.2.2.e. Competency Fields

## Public Health Sciences

#### Before EEP

Describe how a public health perspective and evidence-based approaches can be used to improve community health. \*

- No experience
- Beginner
- Competent
- Proficient
- Expert
- I did not focus on this competency during my rotation

Apply the basic public health sciences (including, but not limited to, biostatistics, epidemiology, prevention science, environmental health sciences, and social and behavioral health sciences) to assess and address public health concerns, \*

- No experience
- Beginner
- Competent
- Proficient
- Expert
- I did not focus on this competency during my rotation

#### After EEP

Describe how a public health perspective and evidence-based approaches can be used to improve community health. \*

- No experience
- Beginner
- Competent
- Proficient
- Expert
- I did not focus on this competency during my rotation

Apply the basic public health sciences (including, but not limited to, biostatistics, epidemiology, prevention science, environmental health sciences, and social and behavioral health sciences) to assess and address public health concerns.\*

- No experience
- Beginner
- Competent
- Proficient
- Expert
- I did not focus on this competency during my rotation

Table 7.1.2.2.e. Competency Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Describe how a public health perspective	1. No experience	No	No	No	Yes	No	No	No	No	No
and evidence-based approaches can be	2. Beginner									
used to improve community health.	3. Competent									
	4. Proficient									
	5. Expert									
	6. I did not focus on this competency									
	during my rotation									
Apply the basic public health sciences	1. No experience	No	No	No	Yes	No	No	No	No	No
(including, but not limited to,	2. Beginner									
biostatistics, epidemiology, prevention	3. Competent									
science, environmental health sciences,	4. Proficient									
and social and behavioral health	5. Expert									
sciences) to assess and address public	6. I did not focus on this competency									
health concerns.	during my rotation									

Figure 7.1.2.2.f. Competency Fields

Communication	After EEP
Before EEP	Use the standard scientific format to clearly and concisely report research
Use the standard scientific format to clearly and concisely report research	findings. *
findings.*	No experience
No experience	Beginner
Beginner	Competent
Competent	Proficient
Proficient	Expert
Expert	I did not focus on this competency during my rotation
I did not focus on this competency during my rotation	Participate in teams as a member and/or leader. *
Participate in teams as a member and/or leader. *	No experience
No experience	Beginner
Beginner	Competent
Competent	Proficient
Proficient	Expert
Expert	I did not focus on this competency during my rotation
<ul> <li>I did not focus on this competency during my rotation</li> </ul>	Communicate erally electronically and in writing with linguistic and cultural
Communicate orally, electronically, and in writing with linguistic and cultural	Communicate orally, electronically, and in writing with linguistic and cultural proficiency.*
proficiency.*	No experience
No experience	Beginner
Beginner	Competent
Competent	Proficient
Proficient	
Expert	Expert     I did not focus on this competency during my rotation
<ul> <li>I did not focus on this competency during my rotation</li> </ul>	Take not locas on this competency during my lotation
Solicit and discuss feedback from supervisors and colleagues to improve personal learning. *	Solicit and discuss feedback from supervisors and colleagues to improve personal learning. *
No experience	No experience
Beginner	Beginner
© Competent	<ul> <li>Competent</li> </ul>
Proficient	O Proficient
© Expert	O Expert
I did not focus on this competency during my rotation	I did not focus on this competency during my rotation
Take not rooms on this competency during my rotation	

Table 7.1.2.2.f. Competency Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Use the standard scientific format to clearly and concisely report research findings.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No
Participate in teams as a member and/or leader.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No
Communicate orally, electronically, and in writing with linguistic and cultural proficiency.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No
Solicit and discuss feedback from supervisors and colleagues to improve personal learning.	1. No experience 2. Beginner 3. Competent 4. Proficient 5. Expert 6. I did not focus on this competency during my rotation	No	No	No	Yes	No	No	No	No	No

# **7.1.2.3** Future Considerations

Figure 7.1.2.3.a. Future Consideration Fields

Future Considerations
Why did you choose to participate in EEP? (Select all that apply) $^{\star}$
Gain experience in applied epidemiology
Gain experience in public health
Learn about preventive medicine
■ Learn about CDC and/or the Epidemic Intelligence Service (EIS)
■ Interested in working for CDC and/or EIS
■ Networking opportunities
□ Other
Specify: *
Please indicate your level of agreement with the following statements:
My EEP experience provided me with a network of public health professionals with whom I can connect in the futuree *
with whom I can connect in the futuree *
with whom I can connect in the futuree *  Strongly Disagree
with whom I can connect in the futuree *  Strongly Disagree  Disagree
with whom I can connect in the futuree *  Strongly Disagree  Disagree  Neither Agree or Disagree
with whom I can connect in the futuree *  Strongly Disagree  Disagree  Neither Agree or Disagree  Agree
with whom I can connect in the futuree *  Strongly Disagree  Disagree  Neither Agree or Disagree  Agree  Strongly Agree
with whom I can connect in the futuree *  Strongly Disagree Disagree Neither Agree or Disagree Agree Strongly Agree My EEP experience made me more likely to pursue a public health career. *
with whom I can connect in the futuree *  Strongly Disagree Disagree Neither Agree or Disagree Agree Strongly Agree My EEP experience made me more likely to pursue a public health career. *  Strongly Disagree
with whom I can connect in the futuree *  Strongly Disagree  Disagree  Neither Agree or Disagree  Agree  Strongly Agree  My EEP experience made me more likely to pursue a public health career. *  Strongly Disagree  Disagree

Table 7.1.2.3.a. Future Consideration Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Why did you choose to participate in EEP? (Select all that apply)	1. Gain experience in applied epidemiology 2. Gain experience in public health 3. Learn about preventive medicine 4. Learn about CDC and/or the Epidemic Intelligence Service (EIS) and other fellowships 5. Interested in working for CDC and/or EIS 6. Networking opportunities 7. Other	No	No	No	Yes	No	No	No	No	No
Please specify:	-	No	No	No	Yes	No	No	No	No	No
My EEP experience provided me with a network of public health professionals with whom I can connect in the future.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
My EEP experience made me more likely to pursue a public health career.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
My EEP experience made me more likely to incorporate public health perspectives into clinical practice.	Strongly Disagree     Disagree     Neither Agree or Disagree     Agree     Strongly Agree	No	No	No	Yes	No	No	No	No	No
My EEP experience made me more likely to pursue additional public health training.	1. Strongly Disagree 2. Disagree 3. Neither Agree or Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No

Figure 7.1.2.3.b. Future Consideration Fields

	Strongly Disagree
	Disagree
	Neither Agree or Disagree
	Agree
	Strongly Agree
	My EEP experience made me more likely to apply for the Epidemic Intelligence Service (EIS) in the future. *
	Strongly Disagree
My EEP experience provided me with a network of public health professionals	Disagree
with whom I can connect in the future. *	Neither Agree or Disagree
Strongly Disagree	Agree
O Disagree	Strongly Agree
Neither Agree or Disagree	My EEP experience made me more likely to apply for the CDC Preventative
O Agree	Medicine Residency and Fellowship (PMR/F) program in the future. *
Strongly Agree	Strongly Disagree
My EEP experience made me more likely to pursue a public health career. *	Disagree
Strongly Disagree	Neither Agree or Disagree
O Disagree	Agree
Neither Agree or Disagree	Strongly Agree
O Agree	In 3-5 sentences, please describe how you plan to apply the knowledge, skills,
Strongly Agree	and experience gained from EEP to your future training and career: *
My EEP experience made me more likely to incorporate public health	
perspectives into clinical practice. *	What are a see beginning for your to see the see of the
Strongly Disagree	What are some barriers for you to pursue a public health career? (Select all that apply) *
O Disagree	Potential salary range
Neither Agree or Disagree	☐ High student loan debt
O Agree	☐ Limited clinical contact hours
Strongly Agree	Additional training or degrees required

training. \*

My EEP experience made me more likely to pursue additional public health

Table 7.1.3.4.b. Future Consideration Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
My EEP experience made me more likely to apply for the Epidemic Intelligence Service (EIS) in the future.	1. Strongly Disagree 2. Disagree 3. Neither Agree or Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No
My EEP experience made me more likely to apply for the CDC Preventative Medicine Residency and Fellowship (PMR/F) program in the future.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
In 3-5 sentences, please describe how you plan to apply the knowledge, skills, and experience gained from EEP to your future training and career:	-	No	No	No	Yes	No	No	No	No	No
What are some barriers for you to pursue a public health career? (Select all that apply)	Potential salary range     High student loan debt     Limited clinical contact hours     Additional training or degrees required	No	No	No	Yes	No	No	No	No	No

# **7.2 SAF**

# 7.2.1 Summer Course Satisfaction Survey

## 7.2.1.1 Introduction

Figure 7.2.1.1.a. Introduction Fields

SAF Summer Course Satisfaction Survey	2. In the past school year, which subject area(s) did you teach? (Select all that apply) $^{\star}$
Curvey	☐ Epidemiology or Public Health
Attachment 1: 2019 Science Ambassador Fellowship Summer Course Satisfaction Survey	<ul> <li>Core Sciences (e.g., Life Sciences, Physical Sciences, Earth and Space Sciences, Engineering, and Technology)</li> <li>Health and Medical Sciences</li> <li>Other</li> </ul>
Introduction	Specify: *
Thank you for participating in the 2019 CDC Science Ambassador summer course! The	
Inank you for participating in the 2019 CDC Science Ambassador summer course. In information you provide will be used to guide the direction of future summer courses. Your participation is voluntary and your answers will not affect earning continuing education units.	3. In the past school year, which resource(s) did you use to teach public health? (Select all that apply) *
You may take this survey anonymously. Information will be treated in a secure manner.	□ N/A
This survey will take approximately 10 minutes to complete. By continuing to the next page, you have consented to complete this survey.	CDC Science Ambassador Fellowship Lesson Plans/Activities
Please contact scienceambassador@cdc.gov if you have any questions or problems concerning this survey.	CDC Website
1. In the past school year, which grade(s) did you teach? (Select all that apply) *	Other Lesson Plans/Activities (e.g., Young Epidemiology Scholars Lesson Plans) or Websites (e.g., Medical Detectives).
□ Elementary School (grades K-5)     □ Middle School (grades 6-8)	Please provide at least 1-2 examples; *
High School (grades 9-12)	
□ Community College	//
☐ College (Undergraduate)	A la the supervisor achieves de servicion to teach an entire accordant
☐ College (Graduate)	4. In the upcoming school year, do you plan to teach an entire course related to public health? *
Other: Curriculum Development	public fleatur:
Other: Professional Development	Yes, I plan to in the next year.
Other (Specify)	No, but I plan to in the future.
Specify: *	No, but I plan to incorporate public health into my current course.
	None of the above.

Table 7.2.1.1.a. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
1. In the past school year, which	1. Elementary School (grades K-5)	No	No	No	No	Yes	No	No	No	No
grade(s) did you teach? (Select all	2. Middle School (grades 6-8)									
that apply)	3. High School (grades 9-12)									
	2. Community College									
	3. College (Undergraduate)									
	4. College (Graduate)									
	5. Other: Curriculum Development									
	6. Other: Professional Development									
	7. Other (Specify)									
Specify:	-	No	No	No	No	Yes	No	No	No	No
2. In the past school year, which	1. Epidemiology or Public Health	No	No	No	No	Yes	No	No	No	No
subject area(s) did you teach?	2. Core Sciences (e.g., Life Sciences, Physical Sciences,									
(Select all that apply)	Earth and Space Sciences, Engineering, and Technology)									
	3. Health and Medical Sciences									
	4. Other									
Specify:	-	No	No	No	No	Yes	No	No	No	No
3. In the past school year, which	1. N/A	No	No	No	No	Yes	No	No	No	No
resource(s) did you use to teach	2. CDC Science Ambassador Fellowship Lesson									
public health? (Select all that apply)	Plans/Activities									
	3. CDC Website									
	4. Other Lesson Plans/Activities (e.g., Young									
	Epidemiology Scholars Lesson Plans) or Websites (e.g.,									
	Medical Detectives). Please provide at least 1-2									
	examples:									
Examples:	-	No	No	No	No	Yes	No	No	No	No
4. In the upcoming school year, do	1. Yes, I plan to in the next year.	No	No	No	No	Yes	No	No	No	No
you plan to teach an entire course	2. No, but I plan to in the future.									
related to public health?	3. No, but I plan to incorporate public health into my									
	current course.									
	4. None of the above.									

## Figure 7.2.1.1.b. Introduction Fields

5. Do any of the schools where you teach receive Title I funds? *	
	Confidence in teaching public health content *
○ Yes	Not a barrier
○ No	Somewhat of a barrier
I am not sure	
I prefer not to answer	Major barrier
Not applicable	School support for teaching public health content *
6. Which of the following are barriers to your teaching public health	Not a barrier
<ol><li>Which of the following are barriers to your teaching public health</li></ol>	Somewhat of a barrier
Availability of public health activities and lesson plans *	Major barrier
Not a barrier	Student interest in public health *
Somewhat of a barrier	Student interest in public health
Major barrier	Not a barrier
,	Somewhat of a barrier
Basic knowledge to teach public health content *	Major barrier
Not a barrier	Other (Consist)
Somewhat of a barrier	Other (Specify):
Major barrier	
Skills to teach public health content *	Other: *
Not a barrier	Not a barrier
Somewhat of a barrier	Somewhat of a barrier
Major barrier	Major barrier

Table 7.2.1.1.b. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
5. Do any of the schools where you teach receive Title I funds?	1. Yes 2. No 3. I am not sure 4. I prefer not to answer 5. Not applicable	No	No	No	No	Yes	No	No	No	No
Availability of public health activities and lesson plans	<ol> <li>Not a barrier</li> <li>Somewhat of a barrier</li> <li>Major barrier</li> </ol>	No	No	No	No	Yes	No	No	No	No
Basic knowledge to teach public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Skills to teach public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Confidence in teaching public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
School support for teaching public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Student interest in public health	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Other (Specify)	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Specify:		No	No	No	No	Yes	No	No	No	No

## Figure 7.2.1.1.c. Introduction Fields

7. Please provide your best estimations for the following:
Please enter 0 for the following values that are non-applicable to you.
If you teach in a classroom setting, how many students did you teach public health content to as part of your curriculum or elective course in the past school year? *
How many teachers did you train in teaching public health content in the past school year? *
How many students did you coach through extracurricular clubs or programs at your school related to public health (e.g., Science Olympiad Disease Detectives coach; HOSA supervisor for Public Health or Epidemiology event) in the past school year? *
How many instructional hours did you dedicate to teaching public health content in the past school year? *

Table 7.2.1.1.c. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
If you teach in a classroom setting, how many students did you teach public health content to as part of your curriculum or elective course in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many teachers did you train in teaching public health content in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many students did you coach through extracurricular clubs or programs at your school related to public health (e.g., Science Olympiad Disease Detectives coach; HOSA supervisor for Public Health or Epidemiology event) in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many instructional hours did you dedicate to teaching public health content in the past school year?	-	No	No	No	No	Yes	No	No	No	No

Figure 7.2.1.1.d. Introduction Fields

8. For my Science Ambassador Fellowship presentation requirement, I plan to present a session about teaching public health content at: (Select all that apply) *
<ul> <li>Local conference, meeting, or professional development training session</li> </ul>
State/regional conference, meeting, or professional development training session
<ul> <li>National conference, meeting, or professional development training session</li> </ul>
<ul> <li>International conference, meeting, or professional development training session</li> </ul>
Other (Specify)
Specify: *
9. Please indicate your level of agreement with the following statements.
I was satisfied with the pre-course communication about the CDC Science Ambassador Fellowship summer course. *
Strongly Disagree
Disagree
Neutral
O Agree
Strongly Agree
Please explain and provide suggestions for improvement related to pre-course communication. *

**Table 7.2.1.1.d. Introduction Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
8. For my Science Ambassador Fellowship presentation requirement, I plan to present a session about teaching public health content at: (Select all that apply)	1. Local conference, meeting, or professional development training session 2. State/regional conference, meeting, or professional development training session 3. National conference, meeting, or professional development training session 4. International conference, meeting, or professional development training session 5. Other (Specify)	No	No	No	No	Yes	No	No	No	No
Specify:	-	No	No	No	No	Yes	No	No	No	No
I was satisfied with the pre-course communication about the CDC Science Ambassador Fellowship summer course.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Please explain and provide suggestions for improvement related to pre-course communication.	-	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.1.1.e. Introduction Fields

10. Please indicate your level of agreement with each of the following: "I found the helpful in increasing my knowledge, skills, or confidence in teaching public health.
Introduction Sessions (CDC Welcome, CDC Mission, CDC Curriculum: Teaching tomorrow's disease detectives) $^{\star}$
Strongly Disagree
○ Disagree
Neutral
○ Agree
Strongly Agree
Topic Sessions by CDC Subject Matter Experts (SME) *
Strongly Disagree
○ Disagree
O Neutral
○ Agree
Strongly Agree
Activity Planning Sessions *
Strongly Disagree
○ Disagree
O Neutral
○ Agree
Strongly Agree
Teacher Talks *
Strongly Disagree
○ Disagree
O Neutral
○ Agree
Strongly Agree

Table 7.2.1.1.e. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Introduction Sessions (CDC Welcome, CDC Mission, CDC Curriculum: Teaching tomorrow's disease detectives)	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Topic Sessions by CDC Subject Matter Experts (SME)	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Activity Planning Sessions	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Teacher Talks	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

Figure 7.2.1.1.f. Introduction Fields

Tours & Special Sessions *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
Overall Summer Course *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
Please comment on sessions were the most helpful and provide suggestions for improvement. *
11. Are you serving as a peer leader this year? *
○ Yes
◎ No

**Table 7.2.1.1.f. Introduction Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SA	PHIFP	PE	ELI	PHAP
Tours & Special Sessions	1. Strongly	No	No	No	No	Yes	No	N	No	No
Tours & Special Sessions		INO	INO	INO	INO	165	INO		INO	INO
	Disagree							0		
	2. Disagree									
	3. Neutral									
	4. Agree									
	5. Strongly Agree									
Overall Summer Course	1. Strongly	No	No	No	No	Yes	No	N	No	No
	Disagree							0		
	2. Disagree									
	3. Neutral									
	4. Agree									
	5. Strongly Agree									
Please comment on sessions were the most helpful and provide suggestions for	-	No	No	No	No	Yes	No	N	No	No
improvement.								0		
11. Are you serving as a peer leader this year?	1. Yes	No	No	No	No	Yes	No	N	No	No
	2. No							0		

# 7.2.1.2 Reflection on Fellowship - Fellows

## Figure 7.2.1.2.a. Reflection on Fellowship - Fellow Fields

Reflection on Fellowship - Fellows
12. Please indicate your level of agreement with the following statement:
Prior to participation in the CDC Science Ambassador Fellowship summer course, I felt confident teaching public health content. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
13. Please indicate your level of agreement with the following statements.
Participation in the CDC Science Ambassador Fellowship summer course improved my understanding of the basic knowledge needed to teach public health content effectively.*
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
The CDC Science Ambassador Fellowship summer course improved my skills to teach public health content effectively. $^{\ast}$
Strongly Disagree
O Disagree
Neutral
O Agree
Strongly Agree
Participation in the CDC Science Ambassador Fellowship summer course motivated me to teach public health content. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree

Table 7.2.1.2.a. Reflection on Fellowship - Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Prior to participation in the CDC Science Ambassador Fellowship summer course, I felt confident teaching public health content.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship summer course improved my understanding of the basic knowledge needed to teach public health content effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
The CDC Science Ambassador Fellowship summer course improved my skills to teach public health content effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship summer course motivated me to teach public health content.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.1.2.b. Reflection on Fellowship - Fellow Fields

After participation in the CDC Science Ambassador Fellowship summer course, I feel confident that I can teach public health content. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
The CDC Science Ambassador Fellowship summer course met my professional expectations.*
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
The CDC Science Ambassador Fellowship summer course has motivated me to pursue additional public health training and professional development opportunities. Please elaborate. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
Elaborate: *
14. Do you plan to apply to be a Science Ambassador Fellowship peer leader?*
A peer leader serves as the lead for the curriculum development team. They are a Science
Ambassador Alumni and come back to CDC during the fellowship week.
Yes, I plan to apply next year.
Yes, I plan to apply in the future.
Maybe, I am not sure yet.
No, while I would like to, it would be difficult to return as a peer leader.
No, I do not plan to apply.
None of the above.

Table 7.2.1.2.b. Reflection on Fellowship - Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
After participation in the CDC Science Ambassador Fellowship summer course, I feel confident that I can teach public health content.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
The CDC Science Ambassador Fellowship summer course met my professional expectations.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
The CDC Science Ambassador Fellowship summer course has motivated me to pursue additional public health training and professional development opportunities. Please elaborate.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neutral</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	No	Yes	No	No	No	No
Elaborate:	-	No	No	No	No	Yes	No	No	No	No
14. Do you plan to apply to be a Science Ambassador Fellowship peer leader?	1. Yes, I plan to apply next year. 2. Yes, I plan to apply in the future. 3. Maybe, I am not sure yet. 4. No, while I would like to, it would be difficult to return as a peer leader. 5. No, I do not plan to apply. 6. None of the above.	No	No	No	No	Yes	No	No	No	No

# 7.2.1.3 Reflection on Fellowship - Peer Leaders

Figure 7.2.1.3.a. Reflection on Fellowship - Peer Leader Fields

Reflection on Fellowship – Peer Leaders	
15. Please indicate your level of agreement with the following statements:	
Participation in the CDC Science Ambassador Fellowship summer course as a peer leader improved my understanding of the basic knowledge needed to teach public health content effectively. *	
Strongly Disagree	
O Disagree	After participation in the CDC Science Ambassador Fellowship summer course
Neutral	as a peer leader, I feel confident in mentoring other teachers in how to teach
O Agree	public health content effectively. *
Strongly Agree	1
Participation in the CDC Science Ambassador Fellowship summer course as a	Strongly Disagree
peer leader provided me with the opportunity to practice my leadership skills. *	Disagree
Strongly Disagree	Neutral
O Disagree	Agree
O Neutral	Strongly Agree
○ Agree	Strongly Agree
Strongly Agree	Participation in the CDC Science Ambassador Fellowship summer course as a
Participation in the CDC Science Ambassador Fellowship summer course as a	peer leader met my professional expectations.*
peer leader motivated me to encourage other teachers to teach public health	O. Charata Pianasa
content. *	Strongly Disagree
Strongly Disagree	Disagree
O Disagree	Neutral
Neutral	Agree
Agree	
Strongly Agree	Strongly Agree

Table 7.2.1.3.a. Reflection on Fellowship - Peer Leader Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Participation in the CDC Science Ambassador Fellowship summer course as a peer leader improved my understanding of the basic knowledge needed to teach public health content effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship summer course as a peer leader provided me with the opportunity to practice my leadership skills.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship summer course as a peer leader motivated me to encourage other teachers to teach public health content.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
After participation in the CDC Science Ambassador Fellowship summer course as a peer leader, I feel confident in mentoring other teachers in how to teach public health content effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship summer course as a peer leader met my professional expectations.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

# 7.2.2 Fellow Exit Survey

## 7.2.2.1 Introduction

Figure 7.2.2.1.a. Introduction Fields

# SAF Exit Survey

# Attachment 1: 2018 Science Ambassador Fellowship Exit Satisfaction Survey

#### Introduction

Thank you for participating in the 2018 CDC Science Ambassador Fellowship! The information you provide will be used to guide the direction of future Fellowships. Your participation is voluntary and your answers will not affect earning continuing education units

You may take this survey anonymously. Information will be treated in a secure manner.

This survey will take approximately 10 minutes to complete. By continuing to the next page, you have consented to complete this survey.

Please contact scienceambassador@cdc.gov if you have any questions or problems concerning this survey.

concerning this survey.
1. In the past school year, which grade(s) did you teach? (Select all that apply) *
■ Elementary School (grades K-5)
■ Middle School (grades 6-8)
Community College
College (Undergraduate)
College (Graduate)
Other: Curriculum Development
Other: Professional Development
Other (Specify)
Specify: *

Table 7.2.2.1.a. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
1. In the past school year, which grade(s) did you teach? (Select all that apply)	1. Elementary School (grades K-5) 2. Middle School (grades 6-8) 3. High School (grades 9-12) 2. Community College 3. College (Undergraduate) 4. College (Graduate) 5. Other: Curriculum Development 6. Other: Professional Development 7. Other (Specify)	No	No	No	No	Yes	No	No	No	No
Specify:	-	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.2.1.b. Introduction Fields

<ol> <li>In the past school year, which subject area(s) did you teach? (Select all that apply) *</li> </ol>
■ Epidemiology or Public Health
<ul> <li>Core Sciences (e.g., Life Sciences, Physical Sciences, Earth and Space Sciences, Engineering, and Technology)</li> </ul>
☐ Health and Medical Sciences
□ Other
Specify: *
3. In the past school year, which resource(s) did you use to teach public health content? (Select all that apply) $^{\star}$
□ N/A
CDC Science Ambassador Fellowship Lesson Plans/Activities
□ CDC Website
<ul> <li>Other Lesson Plans/Activities (e.g., Young Epidemiology Scholars Lesson Plans) or Websites (e.g., Medical Detectives).</li> </ul>
Please provide at least 1-2 examples: *
5. Do any of the schools where you teach receive Title I funds? $^{\star}$
O Yes
○ No
O I am not sure
I prefer not to answer
Not applicable

Table 7.2.2.1.b. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
2. In the past school year, which subject area(s) did you teach? (Select all that apply)	1. Epidemiology or Public Health 2. Core Sciences (e.g., Life Sciences, Physical Sciences, Earth and Space Sciences, Engineering, Technology, and Applications of Science) 3. Health and Medical Sciences 4. Other (Specify)	No	No	No	No	Yes	No	No	No	No
Specify:		No	No	No	No	Yes	No	No	No	No
3. In the past school year, which resource(s) did you use to teach public health content? (Select all that apply)	1. N/A 2. CDC Science Ambassador Fellowship Lesson Plans/Activities 3. CDC Website 4. Other Lesson Plans/Activities (e.g., Young Epidemiology Scholars Lesson Plans) or Websites (e.g., Medical Detectives). Please provide at least 1-2 examples:	No	No	No	No	Yes	No	No	No	No
Examples:		No	No	No	No	Yes	No	No	No	No
4. In the upcoming school year, do you plan to teach an entire course related to public health?	1. Yes, I plan to in the next year. 2. No, but I plan to in the future. 3. No, but I plan to incorporate public health into my current course. 4. None of the above.	No	No	No	No	Yes	No	No	No	No
5. Do any of the schools where you teach receive Title I funds?	1. Yes 2. No 3. I am not sure 4. I prefer not to answer 5. Not applicable	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.2.1.c. Introduction Fields

6. Which of the following are barriers to your teaching public health?
Availability of public health activities and lesson plans *
Not a barrier
Somewhat of a barrier
Major barrier
Basic knowledge to teach public health content *
Not a barrier
Somewhat of a barrier
Major barrier
Skills to teach public health content *
Not a barrier
Somewhat of a barrier
Major barrier
Confidence in teaching public health content *
Not a barrier
Somewhat of a barrier
Major barrier
School support for teaching public health content *
Not a barrier
Somewhat of a barrier
Major barrier
Student interest in public health *
Not a barrier
Somewhat of a barrier
Major barrier

Table 7.2.2.1.c. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Availability of public health activities and lesson plans	<ol> <li>Not a barrier</li> <li>Somewhat of a barrier</li> <li>Major barrier</li> </ol>	No	No	No	No	Yes	No	No	No	No
Basic knowledge to teach public health content	<ol> <li>Not a barrier</li> <li>Somewhat of a barrier</li> <li>Major barrier</li> </ol>	No	No	No	No	Yes	No	No	No	No
Skills to teach public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Confidence in teaching public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
School support for teaching public health content	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No
Student interest in public health	Not a barrier     Somewhat of a barrier     Major barrier	No	No	No	No	Yes	No	No	No	No

Figure 7.2.2.1.d. Introduction Fields

Other (Specify):
Other: *
Not a barrier
Somewhat of a barrier
Major barrier
7. Please indicate your level of agreement with the following statements.
After the CDC Science Ambassador Fellowship summer course, I was able to use the network of CDC Science Ambassador fellows and peer leaders as resources. *
Strongly Disagree
○ Disagree
O Neutral
○ Agree
Strongly Agree
The interaction I had with the network of CDC Science Ambassador fellows and peer leaders was helpful to me in teaching public health. *
Strongly Disagree
○ Disagree
Neutral
○ Agree
Strongly Agree

Table 7.2.2.1.d. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Other (Specify)	<ol> <li>Not a barrier</li> <li>Somewhat of a barrier</li> <li>Major barrier</li> </ol>	No	No	No	No	Yes	No	No	No	No
Specify:	-	No	No	No	No	Yes	No	No	No	No
After the CDC Science Ambassador Fellowship summer course, I was able to use the network of CDC Science Ambassador fellows and peer leaders as resources.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neutral</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	No	Yes	No	No	No	No
The interaction I had with the network of CDC Science Ambassador fellows and peer leaders was helpful to me in teaching public health.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.2.1.e. Introduction Fields

8. Please provide your best estimations for the following:
Please enter 0 for the following values that are non-applicable to you.
If you teach in a classroom setting, how many students did you teach public health content to as part of your curriculum or elective course in the past school year? *
How many teachers did you train in teaching public health content in the past school year? *
How many students did you coach through extracurricular clubs or programs at your school related to public health (e.g., Science Olympiad Disease Detectives coach; HOSA supervisor for Public Health or Epidemiology event) in the past school year? *
How many instructional hours did you dedicate to teaching public health in the past school year? *
How many teachers/colleagues did you share your team's CDC Science Ambassador Fellowship activity within the past school year? *
How many teachers/colleagues have you recommended the CDC Science Ambassador Fellowship to in the past school year? *

Table 7.2.2.1.e. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
If you teach in a classroom setting, how many students did you teach public health content to as part of your curriculum or elective course in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many teachers did you train in teaching public health content in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many students did you coach through extracurricular clubs or programs at your school related to public health (e.g., Science Olympiad Disease Detectives coach; HOSA supervisor for Public Health or Epidemiology event) in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many instructional hours did you dedicate to teaching public health in the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many teachers/colleagues did you share your team's CDC Science Ambassador Fellowship activity within the past school year?	-	No	No	No	No	Yes	No	No	No	No
How many teachers/colleagues have you recommended the CDC Science Ambassador Fellowship to in the past school year?	-	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.2.1.f. Introduction Fields

Apart from your CDC Science Ambassador Fellowship activity, did you develop any new public health content (e.g., activities, lesson plans, or curricula) in the past school year? *
○ Yes
◎ No
In the past school year, did you teach the activity that you developed as part of the Science Ambassador Fellowship summer course? $^{\star}$
O Yes
◎ No

**Table 7.2.2.1.f. Introduction Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Apart from your CDC Science Ambassador	1. Yes	No	No	No	No	Yes	No	No	No	No
Fellowship activity, did you develop any	2. No									
new public health content (e.g., activities,										
lesson plans, or curricula) in the past										
school year?										
In the past school year, did you teach the	1. Yes	No	No	No	No	Yes	No	No	No	No
activity that you developed as part of the	2. No									
Science Ambassador Fellowship summer										
course?										

## Figure 7.2.2.1.g. Introduction Fields

Table 7.2.2.1.g. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
I was satisfied with the interaction with CDC Science Ambassador Fellowship team throughout the fellowship year.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Please provide suggestions for improvement on interaction with the CDC Science Ambassador Fellowship team.	-	No	No	No	No	Yes	No	No	No	No
I was satisfied with the Quarterly Newsletter.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Please provide suggestions for improvement on the quarterly newsletter.		No	No	No	No	Yes	No	No	No	No

Figure 7.2.2.1.h. Introduction Fields

10. Please provide feedback for improvement on the following questions
Which aspects of the CDC Science Ambassador Fellowship were most helpful to you?*
What could be improved to make the CDC Science Ambassador Fellowship a more effective learning experience?*
11. Did you serve as a peer leader this year?*
○ Yes
○ No

Table 7.2.2.1.h. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Which aspects of the CDC Science	-	No	No	No	No	Yes	No	No	No	No
Ambassador Fellowship were most helpful to										
you?										
What could be improved to make the CDC	-	No	No	No	No	Yes	No	No	No	No
Science Ambassador Fellowship a more										
effective learning experience?										
11. Did you serve as a peer leader this year?	1. Yes	No	No	No	No	Yes	No	No	No	No
	2. No									

# 7.2.2.2 Reflections on Fellowship - Fellows

## Figure 7.2.2.2.a. Reflections on Fellowship - Fellow Fields

12. Please indicate your level of agreement with the following statements:
Participation in the CDC Science Ambassador Fellowship improved my understanding of the basic knowledge needed to teach public health content effectively. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
The CDC Science Ambassador Fellowship improved my skills to teach public health content effectively. $^{\star}$
Strongly Disagree
Disagree
Neutral
O Agree
Strongly Agree
Participation in the CDC Science Ambassador Fellowship motivated me to teach public health content. *
Strongly Disagree
O Disagree
Neutral
Agree
Strongly Agree
After participation in the CDC Science Ambassador Fellowship, I feel confident teaching public health content. $^{\star}$
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree

Table 7.2.2.2.a. Reflections on Fellowship - Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Participation in the CDC Science Ambassador Fellowship improved my understanding of the basic knowledge needed to teach public health content effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
The CDC Science Ambassador Fellowship improved my skills to teach public health content effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship motivated me to teach public health content.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
After participation in the CDC Science Ambassador Fellowship, I feel confident teaching public health content.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

## Figure 7.2.2.2.b. Reflections on Fellowship - Fellow Fields

The CDC Science Ambassador Fellowship met my professional expectations. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
The CDC Science Ambassador Fellowship has motivated me to pursue additional public health training and professional development opportunities. Please elaborate. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
Elaborate: *
I would recommend the CDC Science Ambassador Fellowship to others.*
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
13. Do you plan to apply to be a Science Ambassador Fellowship peer leader? *
A peer leader serves as the lead for the curriculum development team. They are a Science
Ambassador Alumni and come back to CDC during the fellowship week.
Yes, I plan to apply next year.
Yes, I plan to apply in the future.
Maybe, I am not sure yet.
No, while I would like to, it would be difficult to return as a peer leader.
No, I do not plan to apply.

Table 7.2.2.2.b. Reflections on Fellowship - Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
The CDC Science Ambassador Fellowship met my professional expectations.	Strongly Disagree     Disagree     Neutral     Agree     Strongly Agree	No	No	No	No	Yes	No	No	No	No
The CDC Science Ambassador Fellowship has motivated me to pursue additional public health training and professional development opportunities. Please elaborate.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neutral</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	No	Yes	No	No	No	No
Elaborate:  I would recommend the CDC Science Ambassador Fellowship to others.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree	No No	No No	No No	No No	Yes Yes	No No	No No	No No	No No
13. Do you plan to apply to be a Science Ambassador Fellowship peer leader?	<ol> <li>Strongly Agree</li> <li>Yes, I plan to apply next year.</li> <li>Yes, I plan to apply in the future.</li> <li>Maybe, I am not sure yet.</li> <li>No, while I would like to, it would be difficult to return as a peer leader.</li> <li>No, I do not plan to apply.</li> <li>None of the above.</li> </ol>	No	No	No	No	Yes	No	No	No	No

# 7.2.2.3 Reflections on Fellowship - Peer Leaders

Figure 7.2.2.3.a. Reflections on Fellowship - Peer Leader Fields

Reflection on Fellowship - Peer Leaders
15. In what year did you first participate in the Science Ambassador Fellowship or Science Ambassador Workshop? *
16. Please indicate your level of agreement with the following statements:
Participation in the CDC Science Ambassador Fellowship as a peer leader improved my understanding of the basic knowledge needed to teach public health effectively.*
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
Participation in the CDC Science Ambassador Fellowship as a peer leader provided me with the opportunity to practice my leadership skills. *
Strongly Disagree
Disagree
Neutral
O Agree
Strongly Agree
Participation in the CDC Science Ambassador Fellowship as a peer leader motivated me to encourage other teachers to teach public health.*
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree

Table 7.2.2.3.a. Reflections on Fellowship - Peer Leader Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
14. In what year did you first participate in the Science Ambassador Fellowship or Science Ambassador Workshop?	-	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship as a peer leader improved my understanding of the basic knowledge needed to teach public health effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship as a peer leader provided me with the opportunity to practice my leadership skills.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship as a peer leader motivated me to encourage other teachers to teach public health.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

Figure 7.2.2.3.b. Reflections on Fellowship - Peer Leader Fields

After participation in the CDC Science Ambassador Fellowship as a peer leader, I feel confident in mentoring other teachers in how to teach public health effectively.*
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
Participation in the CDC Science Ambassador Fellowship as a peer leader met my professional expectations. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree
I would encourage other CDC Science Ambassador Fellows to apply to become a peer leader. *
Strongly Disagree
Disagree
Neutral
Agree
Strongly Agree

Table 7.2.2.3.b. Reflections on Fellowship - Peer Leader Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
After participation in the CDC Science Ambassador Fellowship as a peer leader, I feel confident in mentoring other teachers in how to teach public health effectively.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
Participation in the CDC Science Ambassador Fellowship as a peer leader met my professional expectations.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No
I would encourage other CDC Science Ambassador Fellows to apply to become a peer leader.	1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree	No	No	No	No	Yes	No	No	No	No

#### **7.3 LLS**

### 7.3.1 Supervisor 1-Year Survey

#### 7.3.1.1 Introduction

Figure 7.3.1.1.a. Introduction Fields

#### Supervisor Orientation: \* LLS Supervisor 1-Year Survey Not at all useful Not very useful Somewhat useful Feedback on the Laboratory Leadership Service Very useful Program N/A Thank you for serving as a supervisor for the Laboratory Leadership Service (LLS) Supervisor Meetings: \* 2018 Fellowship Class! This survey will take 4-6 minutes to complete. The LLS Office needs your Not at all useful feedback about your experience as an LLS Supervisor. Your responses will be kept Not very useful confidential. Please be thorough and candid in your responses, as they will be used to Somewhat useful assess relevant aspects of the program as well as inform program improvement efforts. Very useful Please contact the program at LLScurriculum@cdc.gov with any questions regarding this survey. N/A Administrative support provided to fellows (e.g., onboarding) \* 1. Thinking about your experience hosting and supervising an LLS Fellow, Not at all useful please indicate the extent to Not very useful which you found each of the following program supports to be useful. Somewhat useful Supervisor Handbook: \* Very useful Not at all useful N/A Not very useful If you selected, "not at all useful" or "not very useful" please explain in the space Somewhat useful provided below. \* Very useful N/A

Table 7.3.1.1.a. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Supervisor Handbook	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
Supervisor Orientation	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
Supervisor Meetings	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
Administrative support provided to fellows (e.g., onboarding)	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
If you selected, "not at all useful" or "not very useful" please explain in the space provided below.		No	Yes	No	No	No	No	No	No	No

Figure 7.3.1.1.b. Introduction Fields

Selecting an LLS Fellow: *
Less Support
The same level of support
More support
No support needed
○ N/A
Ensuring the LL\$ Fellow completes CALs (Core Activities of Learning) *
Less Support
The same level of support
More support
<ul> <li>No support needed</li> </ul>
● N/A
Assistance with planning projects for LLS Fellow *
Less Support
The same level of support
More support
o more experi
No support needed
No support needed

Table 7.3.1.1.b. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Selecting an LLS Fellow	1. Less Support 2. The same level of support 3. More support 4. No support needed 5. N/A	No	Yes	No	No	No	No	No	No	No
Ensuring the LLS Fellow completes CALs (Core Activities of Learning)	1. Less Support 2. The same level of support 3. More support 4. No support needed 5. N/A	No	Yes	No	No	No	No	No	No	No
Assistance with planning projects for LLS Fellow	1. Less Support 2. The same level of support 3. More support 4. No support needed 5. N/A	No	Yes	No	No	No	No	No	No	No
If you selected, "less support" or "more support" please specify in the space provided below.	-	No	Yes	No	No	No	No	No	No	No
3. Reflecting back on your experience as a supervisor for the past year, please identify any support services that you did not receive from the LLS program that would have been beneficial or that you wish you had.	-	No	Yes	No	No	No	No	No	No	No

Figure 7.3.1.1.c. Introduction Fields

4. Would you be willing to host another LLS fellow? *
○ Yes
○ No
Undecided
5. Would you recommend participation as a host laboratory in the LLS Fellowship Program to other public health laboratories? *
○ Yes
○ No
Undecided
6. What additional training or experiences would be helpful for LLS Fellows to receive? Please include your thoughts below and indicate the respective course that it pertains to. *

Table 7.3.1.1.c. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
4. Would you be willing to host another LLS fellow?	1. No	No	Yes	No	No	No	No	No	No	No
	2. Yes									
	3. Undecided									
If you selected, "no" or "undecided" please explain.	-	No	Yes	No	No	No	No	No	No	No
5. Would you recommend participation as a host laboratory in	1. No	No	Yes	No	No	No	No	No	No	No
the LLS Fellowship Program to other public health laboratories?	2. Yes									
	3. Undecided									
If you selected, "no" or "undecided" please explain.	-	No	Yes	No	No	No	No	No	No	No
6. What additional training or experiences would be helpful for		No	Yes	No	No	No	No	No	No	No
LLS Fellows to receive? Please include your thoughts below and										
indicate the respective course that it pertains to.										

### 7.3.1.2 Communication

Figure 7.3.1.2.a. Communication Fields

Communications
7. For the next few questions, indicate your level of satisfaction with:
The communications between you and the LLS program: *
Very Dissatisfied
Dissatisfied
Satisfied
Very Satisfied
○ N/A
Your interactions with your CIO ADLS about an LLS-related question or problem:

Table 7.3.1.2.a. Communication Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
The communications between you and the LLS program.	<ol> <li>Very Dissatisfied</li> <li>Dissatisfied</li> <li>Satisfied</li> <li>Very Satisfied</li> <li>Not Applicable</li> </ol>	No	Yes	No	No	No	No	No	No	No
Your interactions with your CIO ADLS about an LLS-related question or problem.	-	No	Yes	No	No	No	No	No	No	No

# 7.3.1.3 Feedback on Hosting an LLS Fellow

Figure 7.3.1.3.a. Feedback on Hosting an LLS Fellow Fields

Feedback on Hosting an LLS Fellow
8. Thinking about the LLS Fellow you supervise, please indicate to what extent you agree or disagree with the following statements.
Your LLS Fellow serves as an active member of the laboratory team: *  Strongly Disagree  Disagree  Strongly Agree
Your LLS Fellow contributes toward advancing laboratory assessments, protocols, or procedures: *
<ul><li>Strongly Disagree</li><li>Disagree</li><li>Agree</li><li>Strongly Agree</li></ul>
Your LLS Fellow supports the development of laboratory safety in the laboratory *
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ul>
Your LLS Fellow supports the development of laboratory quality in the laboratory: *
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ul>

Table 7.3.1.3.a. Feedback on Hosting an LLS Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Your LLS Fellow serves as an active member of the laboratory team.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow contributes toward advancing laboratory assessments, protocols, or procedures.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow supports the development of laboratory safety in the laboratory.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow supports the development of laboratory quality in the laboratory.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No

Figure 7.3.1.3.b. Feedback on Hosting an LLS Fellow Fields

Your LLS Fellow contributes to the advancement of applied health research in the laboratory: $\mbox{^{*}}$
Strongly Disagree
Disagree
Agree
Strongly Agree
My team values the LLS Fellow's contributions: *
Strongly Disagree
Disagree
Agree
Strongly Agree
My team has gained knowledge or skills as a result of participating in the LLS Program: $\ensuremath{^{\star}}$
Strongly Disagree
Disagree
Agree
Strongly Agree
Hosting my LLS Fellow has changed the way I or team members approach laboratory safety: $^{\star}$
Strongly Disagree
Disagree
Agree
Strongly Agree

Table 7.3.1.3.b. Feedback on Hosting an LLS Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Your LLS Fellow contributes to the advancement of applied health research in the laboratory.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
My team values the LLS Fellow's contributions.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
My team has gained knowledge or skills as a result of participating in the LLS Program.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Hosting my LLS Fellow has changed the way I or team members approach laboratory safety.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No

Figure 7.3.1.3.c. Feedback on Hosting an LLS Fellow Fields

Hosting my LLS Fellow has changed the way I or team members approach laboratory quality: *
Strongly Disagree
Disagree
Agree
Strongly Agree
Hosting my LLS Fellow has changed the way I or team members approach laboratory management: *
Strongly Disagree
Disagree
Agree
Strongly Agree
Please share some examples to support your responses to the questions above:

Table 7.3.1.3.c. Feedback on Hosting an LLS Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Hosting my LLS Fellow has changed the way I or team members approach laboratory quality.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Hosting my LLS Fellow has changed the way I or team members approach laboratory management.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Please share some examples to support your responses to the questions above.	-	No	Yes	No	No	No	No	No	No	No

### 7.3.2 Supervisor Exit Survey

#### 7.3.2.1 Introduction

Figure 7.3.2.1.a. Introduction Fields

#### LLS Supervisor Exit Survey Feedback on the Laboratory Leadership Service Program Thank you for serving as a supervisor for the Laboratory Leadership Service (LLS) 2018 Fellowship Class! This survey will take 4-8 minutes to complete. The LLS Office needs your feedback about your experience as an LLS Supervisor. Your responses will Supervisor Orientation: \* be kept confidential. Please be thorough and candid in your responses, as they will be used to assess relevant aspects of the program as well as inform program Not at all useful Please contact the program at LLScurriculum@cdc.gov with any questions regarding Not very useful this survey. Somewhat useful Very useful 1. Thinking about your experience hosting and supervising an LLS Fellow, N/A please indicate the extent to which you found each of the following program supports to be useful. Supervisor Meetings: \* Supervisor Handbook: \* Not at all useful Not at all useful Not very useful Not very useful Somewhat useful Somewhat useful Very useful Very useful N/A Supervisor Orientation: \* Not at all useful If you selected, "not at all useful" or "not very useful" please explain in the Not very useful space provided below. \* Somewhat useful Very useful N/A.

Table 7.3.2.1.a. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Supervisor Handbook	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
Supervisor Orientation	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
Supervisor Meetings	1. Not at all useful 2. Not very useful 3. Somewhat useful 4. Very useful 5. N/A	No	Yes	No	No	No	No	No	No	No
If you selected, "not at all useful" or "not very useful" please explain in the space provided below.	-	No	Yes	No	No	No	No	No	No	No

### Figure 7.3.2.1.b. Introduction Fields

○ N/A
No support needed
More support
The same level of support
Less Support
Ensuring the LLS Fellow completes CALs (Core Activities of Learning) *
O N/A
No support needed
More support
Less Support     The same level of support
Selecting an LLS Fellow: *
following processes:

Table 7.3.2.1.b. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Selecting an LLS Fellow	1. Less Support 2. The same level of support 3. More support 4. No support needed 5. N/A	No	Yes	No	No	No	No	No	No	No
Ensuring the LLS Fellow completes CALs (Core Activities of Learning)	1. Less Support 2. The same level of support 3. More support 4. No support needed 5. N/A	No	Yes	No	No	No	No	No	No	No
Assistance with planning projects for LLS Fellow	1. Less Support 2. The same level of support 3. More support 4. No support needed 5. N/A	No	Yes	No	No	No	No	No	No	No
If you selected, "less support" or "more support" please specify in the space provided below.	-	No	Yes	No	No	No	No	No	No	No

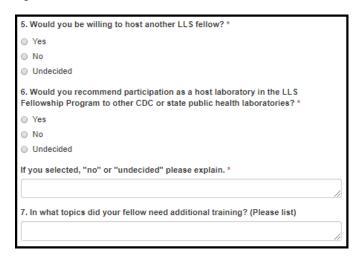
### Figure 7.3.2.1.c. Introduction Fields

2 Deflection has been server as a server in a factor and the section was
<ol> <li>Reflecting back on your experience as a supervisor for the past two years, please identify any support services that you did not receive from the LLS program that would have been beneficial or that you wish you had: *</li> </ol>
Please refer to the 2019 CAL list for the questions listed below. The CAL list for 2019 included:
<ul> <li>CAL 1 - Conduct applied laboratory research to address a public health or safety-related issue.</li> </ul>
<ul> <li>CAL 2 - Conduct a risk assessment to evaluate the probability and potential consequences of</li> </ul>
exposure to a given hazard.
CAL 3 - Evaluate a quality management system.
<ul> <li>CAL 4 - Incorporate bioinformatics principles into applied public health laborator science.</li> </ul>
CAL 5 - Give a 10-20 minute oral presentation to a scientific audience.
CAL 6 - Give an in-depth public health talk on the fellow's original LLS work or field of study.
<ul> <li>CAL 7 - Write and submit, as first author, a scientific manuscript for a peer- reviewed journal.</li> </ul>
<ul> <li>CAL 8 - Participate in laboratory operations management.</li> </ul>
<ul> <li>CAL 9 - Communicate complex scientific concepts to an external lay audience.</li> <li>CAL 10 - Provide service to the agency."</li> </ul>
Are there any CALs that you would recommend removing from the list? *
Yes
⊚ No
If you selected, "yes" to this question, please explain. *

Figure 7.3.2.1.c. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
3. Reflecting back on your experience as	-	No	Yes	No	No	No	No	No	No	No
a supervisor for the past two years,										
please identify any support services that										
you did not receive from the LLS										
program that would have been										
beneficial or that you'd wished you had.										
Are there any CALs that you would	1. Yes	No	Yes	No	No	No	No	No	No	No
recommend removing from the list?	2. No									
If you selected, "yes" to either question,	-	No	Yes	No	No	No	No	No	No	No
please explain.										

Figure 7.3.2.1.d. Introduction Fields



**Table 7.3.2.1.d. Introduction Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
5. Would you be willing to host another	1. Yes	No	Yes	No	No	No	No	No	No	No
LLS fellow?	2. No									
	3. Undecided									
If you selected, "no" or "undecided"	-	No	Yes	No	No	No	No	No	No	No
please explain.										
6. Would you recommend participation	1. Yes	No	Yes	No	No	No	No	No	No	No
as a host laboratory in the LLS	2. No									
Fellowship Program to other CDC or	3. Undecided									
state public health laboratories?										
If you selected, "no" or "undecided"	-	No	Yes	No	No	No	No	No	No	No
please explain.										
7. In what topics did your fellow need	-	No	Yes	No	No	No	No	No	No	No
additional training? (Please list)										

### 7.3.2.2 Communications

Figure 7.3.2.1.a. Communications Fields

Communications
8. For the next few questions, indicate your level of satisfaction with:
The communications between you and the LLS program: *
<ul> <li>Very Dissatisfied</li> </ul>
Dissatisfied
<ul> <li>Satisfied</li> </ul>
<ul> <li>Very Satisfied</li> </ul>
⊚ N/A
Your interactions with your CIO ADLS about an LLS-related question or problem:
9. Please share any suggestions that you have to help LLS Fellows obtain public health laboratory positions after graduation. $^{\pm}$

Table 7.3.2.1.a. Communications Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
The communication between you and the LLS program.	Very Dissatisfied     Dissatisfied     Satisfied     Very Satisfied     Not Applicable	No	Yes	No	No	No	No	No	No	No
Your interactions with your CIO ADLS about an LLS-related question or problem.	Very Dissatisfied     Dissatisfied     Satisfied     Very Satisfied     Not Applicable	No	Yes	No	No	No	No	No	No	No
9. Please share any suggestions that you have to help LLS Fellows obtain public health laboratory positions after graduation.	-	No	Yes	No	No	No	No	No	No	No

# 7.3.2.3 Feedback on Hosting an LLS Fellow

Figure 7.3.2.3.a. Feedback on Hosting an LLS Fellow Fields

Feedback on Hosting an LLS Fellow
10. Would you like to provide feedback regarding LLS Fellow accomplishments? If you do not have any feedback please write, N/A. *
11. Thinking about the LLS Fellow you supervised, please indicate to what extent you agree or disagree with the following statements.
Your LLS Fellow serves as an active member of the laboratory team: *
Strongly Disagree
<ul><li>Disagree</li></ul>
Agree
Strongly Agree
Your LLS Fellow contributes toward advancing laboratory assessments, protocols, or procedures: *
Strongly Disagree
<ul> <li>Disagree</li> </ul>
Agree
Strongly Agree
Your LLS Fellow supports the development of laboratory safety in the laboratory:
Strongly Disagree
<ul><li>Strongly Disagree</li><li>Disagree</li></ul>

Table 7.3.2.3.a. Feedback on Hosting an LLS Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
10. Would you like to provide feedback regarding LLS Fellow accomplishments? If you do not have any feedback please write, N/A.	-	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow serves as an active member of the laboratory team.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow contributes toward advancing laboratory assessments, protocols, or procedures.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow supports the development of laboratory safety in the laboratory.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No

Figure 7.3.2.3.b. Feedback on Hosting an LLS Fellow Fields

	laboratory safety: *
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
Your LLS Fellow supports the development of laboratory quality in the laboratory: *	Hosting my LLS Fellow has changed the way I or team members approach laboratory quality: *
Strongly Disagree	Strongly Disagree
	Disagree
Disagree	O Agree
Agree	Strongly Agree
Strongly Agree	Hosting my LLS Fellow has changed the way I or team members approach laboratory management: *
Your LLS Fellow contributes to the advancement of applied health research in the laboratory: *	Strongly Disagree
the laboratory:	O Disagree
Strongly Disagree	Agree
Disagree	Strongly Agree
Agree	Please share some examples to support your responses to the questions above:
Strongly Agree	*
My team values the LLS Fellow's contributions: *	10
Strongly Disagree	I had a good working relationship with my fellow.*
Disagree	Strongly Disagree
Agree	Disagree
Strongly Agree	Agree
o Strongly Agree	Strongly Agree
My team has gained knowledge or skills as a result of participating in the LLS Program: *	What were the most challenging parts of hosting an LLSF? *
Strongly Disagree	
Disagree	Please describe how you approached supervising your LLSF (i.e., how do you
Agree	interact with your officer, what is your management style)? *
Strongly Agree	

Hosting my LLS Fellow has changed the way I or team members approach

Table 7.3.2.3.b. Feedback on Hosting an LLS Fellow Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Your LLS Fellow supports the development of laboratory quality in the laboratory.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Your LLS Fellow contributes to the advancement of applied health research in the laboratory.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree	No	Yes	No	No	No	No	No	No	No
My team values the LLS Fellow's contributions.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree	No	Yes	No	No	No	No	No	No	No
My team has gained knowledge or skills as a result of participating in the LLS Program.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Hosting my LLS Fellow has changed the way I or team members approach laboratory safety.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Hosting my LLS Fellow has changed the way I or team members approach laboratory quality.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Hosting my LLS Fellow has changed the way I or team members approach laboratory management.	Strongly Disagree     Disagree     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
Please share some examples to support your responses to the question above.	-	No	Yes	No	No	No	No	No	No	No
I had a good working relationship with my fellow.	1. Strongly Disagree	No	Yes	No	No	No	No	No	No	No

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
	2. Disagree									
	3. Agree									
	4. Strongly Agree									
What were the most challenging parts of hosting an	-	No	Yes	No	No	No	No	No	No	No
LLSF?										
Please describe how you approached supervising your	-	No	Yes	No	No	No	No	No	No	No
LLSF (i.e., how do you interact with your officer, what is										
your management style)?										

### 7.4 ELI

### 7.4.1 End of Year Survey

#### 7.4.1.1 Introduction

Figure 7.4.1.1.a Introduction Fields

# Attachment 1. ELI Fellowship End of Year Survey

### Introduction

Thank you for participating in the CDC E-learning Institute Fellowship. We value your feedback to help us improve future cohorts. This anonymous survey should take an average of 8 minutes to complete. Please respond to this survey only once.

If you exit the survey before submitting it, you will not be able to return to edit your responses.

We look forward to your feedback.

Thank you!

CDC E-learning Institute Fellowship

# 7.4.1.2 Increases in Knowledge, Skill, Self-Efficacy

Figure 7.4.1.2.a Increases in Knowledge, Skill, Self-Efficacy Fields

Increases in Knowledge, Skill, Self-Efficacy  1. Please rate your level of agreement with the following statements regarding increases in your knowledge, skill, and/or self-efficacy upon completion of the fellowship.
I am more knowledgeable about how online training products are created. *  I am more knowledgeable about how online training products are created.  Disagree  Neither  Agree  Strongly Agree
I have increased my skill level to develop online training products. *  I am more knowledgeable about how online training products are created.  Disagree  Neither  Agree  Strongly Agree
I feel more prepared to develop an online training product on my own in the future.*  I am more knowledgeable about how online training products are created.  Disagree  Neither  Agree  Strongly Agree
I have been able to directly apply what I have learned to my job. *  I am more knowledgeable about how online training products are created.  Disagree  Neither  Agree  Strongly Agree

Table 7.4.1.2.a Increases in Knowledge, Skill, Self-Efficacy Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
I am more knowledgeable about how online training products are created.	1. Strongly Disagree 2. Disagree 3. Neither 4. Agree 5. Strongly Agree	No	No	No	No	No	No	No	Yes	No
I have increased my skill level to develop online training products.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	No	No	No	No	Yes	No
I feel more prepared to develop an online training product on my own in the future.	1. Strongly Disagree 2. Disagree 3. Neither 4. Agree 5. Strongly Agree	No	No	No	No	No	No	No	Yes	No
I have been able to directly apply what I have learned to my job.	1. Strongly Disagree 2. Disagree 3. Neither 4. Agree 5. Strongly Agree	No	No	No	No	No	No	No	Yes	No

# 7.4.1.3 Instructional Design Competencies

Figure 7.4.1.3.a Instructional Design Competencies Fields

Instructional Design Competencies	
2. Please rate the degree to which the fellowship addressed each competency.	
Instructional Design (process and application) *	
Poor	
Fair	
Good	
Excellent	
Data collection and analysis *	
Poor	
Fair	
○ Good	
Excellent	Formative evaluation *
Needs assessment *	O Poor
Poor	○ Fair
Fair	○ Good
Good	<ul> <li>Excellent</li> </ul>
Excellent	Summative evaluation *
Design of instructional interventions *	Poor
Poor	O Fair
Fair	○ Good
□ Good	
Excellent	<ul><li>Excellent</li></ul>
Learning assessment design *	Project management *
	O Poor
O Poor	○ Fair
Good  Good	○ Good
© Excellent	Excellent
U Excellent	- Execution

Table 7.4.1.3.a Instructional Design Competencies Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Instructional Design (process and application)	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Data collection and analysis	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Needs assessment	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Design of instructional interventions	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Learning assessment design	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Formative evaluation	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Summative evaluation	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Project management	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No

# 7.4.1.4 Capacity Increases Attributed to Fellowship

Figure 7.4.1.4.a. Capacity Increases Attributed to Fellowship Fields

Capacity Increases Attributed to Fellowship		
3. Rate your knowledge of the following topics both before the fellowship and now, after the fellowship.		
Project Management	Analysis	Content Development
Before the Fellowship: *	Before the Fellowship: *	Before the Fellowship: *
Not at all knowledgeable	Not at all knowledgeable	Not at all knowledgeable
Slightly Knowledgeable	<ul> <li>Slightly Knowledgeable</li> </ul>	<ul> <li>Slightly Knowledgeable</li> </ul>
Moderately Knowledgeable	Moderately Knowledgeable	Moderately Knowledgeable
Very Knowledgeable	<ul> <li>Very Knowledgeable</li> </ul>	<ul> <li>Very Knowledgeable</li> </ul>
Extremelely Knowledgeable	Extremelely Knowledgeable	Extremelely Knowledgeable
After the Fellowship: *	After the Fellowship: *	After the Fellowship: *
Not at all knowledgeable	Not at all knowledgeable	Not at all knowledgeable
Slightly Knowledgeable	<ul> <li>Slightly Knowledgeable</li> </ul>	<ul> <li>Slightly Knowledgeable</li> </ul>
Moderately Knowledgeable	Moderately Knowledgeable	Moderately Knowledgeable
Very Knowledgeable	<ul> <li>Very Knowledgeable</li> </ul>	<ul> <li>Very Knowledgeable</li> </ul>
Extremelely Knowledgeable	Extremelely Knowledgeable	Extremelely Knowledgeable

Figure 7.4.1.4.b Capacity Increases Attributed to Fellowship Fields

Learner Assessment	Accessibility	Interface and Navigation	Interactivity	Product Evaluation
Before the Fellowship: *				
<ul> <li>Not at all knowledgeable</li> <li>Slightly Knowledgeable</li> <li>Moderately Knowledgeable</li> <li>Very Knowledgeable</li> <li>Extremelely Knowledgeable</li> </ul>	<ul> <li>Not at all knowledgeable</li> <li>Slightly Knowledgeable</li> <li>Moderately Knowledgeable</li> <li>Very Knowledgeable</li> <li>Extremelely Knowledgeable</li> </ul>	<ul> <li>Not at all knowledgeable</li> <li>Slightly Knowledgeable</li> <li>Moderately Knowledgeable</li> <li>Very Knowledgeable</li> <li>Extremelely Knowledgeable</li> </ul>	<ul> <li>Not at all knowledgeable</li> <li>Slightly Knowledgeable</li> <li>Moderately Knowledgeable</li> <li>Very Knowledgeable</li> <li>Extremelely Knowledgeable</li> </ul>	<ul> <li>Not at all knowledgeable</li> <li>Slightly Knowledgeable</li> <li>Moderately Knowledgeable</li> <li>Very Knowledgeable</li> <li>Extremelely Knowledgeable</li> </ul>
After the Fellowship: *	After the Fellowship: *  Not at all knowledgeable	After the Fellowship: *	After the Fellowship: *	After the Fellowship: *  Not at all knowledgeable
Not at all knowledgeable Slightly Knowledgeable Moderately Knowledgeable Very Knowledgeable Extremelely Knowledgeable	Slightly Knowledgeable     Moderately Knowledgeable     Very Knowledgeable     Extremelely Knowledgeable	Not at all knowledgeable Slightly Knowledgeable Moderately Knowledgeable Very Knowledgeable Extremelely Knowledgeable	<ul> <li>Not at all knowledgeable</li> <li>Slightly Knowledgeable</li> <li>Moderately Knowledgeable</li> <li>Very Knowledgeable</li> <li>Extremelely Knowledgeable</li> </ul>	Slightly Knowledgeable     Moderately Knowledgeable     Very Knowledgeable     Extremelely Knowledgeable

Table 7.4.1.4.a. Capacity Increases Attributed to Fellowship Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Before the Fellowship:	1. Not at all knowledgeable 2. Slightly Knowledgeable 3. Moderately Knowledgeable 4. Very Knowledgeable 5. Extremely Knowledgeable	No	No	No	No	No	No	No	Yes	No
After the Fellowship:	1. Not at all knowledgeable 2. Slightly Knowledgeable 3. Moderately Knowledgeable 4. Very Knowledgeable 5. Extremely Knowledgeable	No	No	No	No	No	No	No	Yes	No

#### 7.4.1.5 Post-Fellowship Implementation

Figure 7.4.1.5.a Post-Fellowship Implementation Fields

# Post-Fellowship Implementation

- 4. Select the answer that best describes what the fellowship enabled you to do, if anything. \*
- It DID NOT enable me to UNDERSTAND NEW CONCEPTS or USE NEW SKILLS.
- It enabled me to UNDERSTAND SOME NEW CONCEPTS, but did NOT PREPARE ME TO USE THE NEW SKILLS on the job.
- It enabled me to BEGIN TRYING TO USE NEW SKILLS on the job.
- It enabled me to CONFIDENTLY USE NEW SKILLS on the job.
- It enabled me to BE THOROUGHLY CONFIDENT AND PRACTICED IN USING NEW SKILLS on the job.
- It enabled me to ACT LIKE AN EXPERT IN APPLYING NEW SKILLS on the job.
- 5. In regards to the best practices taught in the fellowship, how motivated will you be to UTILIZE these skills in your work?  $^{\ast}$
- I will NOT MAKE THIS A PRIORITY when I get back to my day-to-day job.
- I will make this a PRIORITY BUT A LOW PRIORITY when I get back to my dayto-day job.
- I will make this a MODERATE PRIORITY when I get back to my day-to-day job.
- I will make this a HIGH PRIORITY when I get back to my day-to-day job.
- I will make this one of my HIGHEST PRIORITIES when I get back to my day-to-day job.

Table 7.4.1.5.a Post-Fellowship Implementation Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
4. Select the answer that best describes what the fellowship enabled you to do, if anything.	1. It DID NOT enable me to UNDERSTAND NEW CONCEPTS or USE NEW SKILLS. 2. It enabled me to UNDERSTAND SOME NEW CONCEPTS, but did NOT PREPARE ME TO USE THE NEW SKILLS on the job. 3. It enabled me to BEGIN TRYING TO USE NEW SKILLS on the job. 4. It enabled me to CONFIDENTLY USE NEW SKILLS on the job. 5. It enabled me to BE THOROUGHLY CONFIDENT AND PRACTICED IN USING NEW SKILLS on the job. 6. It enabled me to ACT LIKE AN EXPERT IN APPLYING NEW SKILLS on the job.	No	No	No	No	No	No	No	Yes	No
5. In regards to the best practices taught in the fellowship, how motivated will you be to UTILIZE these skills in your work?	1. I will NOT MAKE THIS A PRIORITY when I get back to my day-to-day job. 2. I will make this a PRIORITY – BUT A LOW PRIORITY – when I get back to my day-to-day job. 3. I will make this a MODERATE PRIORITY when I get back to my day-to-day job. 4. I will make this a HIGH PRIORITY when I get back to my day-to-day job. 5. I will make this one of my HIGHEST PRIORITIES when I get back to my day-to-day job.	No	No	No	No	No	No	No	Yes	No

## 7.4.1.6 Overall

#### Figure 7.4.1.6.a Overall Fields

Overall	10. Rate your level of agreement with the following statements about your fellowship experience.
6. How relevant is this fellowship to your current work? *	I would recommend my MENTOR to an incoming ELI fellow. *
Not at all relevant	Strongly Disagree
Slightly relevant	<ul><li>Disagree</li></ul>
Moderately relevant	○ Agree
Very relevant	Strongly Agree
Extremely relevant	Not Applicable
7. What is your opinion of the balance of written material, webinars, and	I would recommend the ELI fellowship program to others. *
interactivity in this fellowship? *	Strongly Disagree
Too much written materials and webinars, and not enough interactive learning	○ Disagree
Right amount of written materials, webinars, and interactive learning	○ Agree
Too much interactive learning and not enough written materials and webinars	Strongly Agree
O Have marcale of subset you become discussed the fall associated and successful associated the fall assoc	Not Applicable
8. How much of what you learned during the fellowship do you expect to use in your position?*	11. How many individuals (peers and mentors) have you developed and plan to
○ None	maintain a professional relationship with beyond the fellowship? For what purposes? *
○ A little	
○ Some	
○ A lot	12. What part of this fellowship was most helpful to your learning? *
O Don't Know	
9. What, if anything, do you plan to use from this fellowship? *	13. Is there anything you want to tell us? *

Table 7.4.1.6.a Overall Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
6. How relevant is this fellowship to your current work?	1. Not at all relevant 2. Slightly relevant 3. Moderately relevant 4. Very relevant 5. Extremely relevant	No	No	No	No	No	No	No	Yes	No
7. What is your opinion of the balance of written material, webinars, and interactivity in this fellowship?	1. Too much written materials and webinars, and not enough interactive learning 2. Right amount of written materials, webinars, and interactive learning 3. Too much interactive learning and not enough written materials and webinars	No	No	No	No	No	No	No	Yes	No
8. How much of what you learned during the fellowship do you expect to use in your position?	1. None 2. A little 3. Some 4. A lot 5. Don't know	No	No	No	No	No	No	No	Yes	No

Table 7.4.1.6.b Overall Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
I would recommend my MENTOR to an incoming ELI fellow.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	No	No	No	No	No	No	No	Yes	No
I would recommend the ELI fellowship program to others.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	No	No	No	No	No	No	No	Yes	No
11. How many individuals (peers and mentors) have you developed and plan to maintain a professional relationship with beyond the fellowship? For what purposes?  12. What part of this fellowship was most	-	No No	No No	No	No No	No	No No	No	Yes	No
helpful to your learning?  13. Is there anything you want to tell us?	<u>.</u>	No	No	No	No	No	No	No	Yes	No

# **7.5 EIS**

# 7.5.1 Supervisor Exit Survey

## 7.5.1.1 Feedback on General EIS Program Support

Figure 7.5.1.1.a Feedback on General EIS Program Support Fields

# EIS Supervisor Exit Survey

Thank you for serving as a supervisor for the Epidemic Intelligence Service (EIS). This survey will take approximately 15 minutes to complete. Your responses will be kept private. Your responses are critical to ensuring program improvements. Please contact eis@cdc.gov with any questions about this survey.

# Feedback on general EIS Program Support

Thinking about your experience hosting and supervising an EIS officer, please indicate your level of agreement with each statement.

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Not applicable

 b) Supervisor orientation provided me with the information I needed to begin supervising my officer.

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Not applicable

c) The EIS program clearly communicated supervisory expectations before the fellowship started.  $^{\ast}$ 

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Not applicable

d) When I had a question or issue to discuss with the EIS program, I knew which person to contact.  $^{\ast}$ 

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Not applicable

e) When I had a question or issue to discuss with the EIS program, the question or issue was resolved within a timely manner. \*

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Not applicable

f) I am satisfied with the support received from the EIS program. \*

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Not applicable

Figure 7.5.1.1.b Feedback on General EIS Program Support Fields

f) I am satisfied with the support received from the EIS program. *	
Strongly Disagree	
O Disagree	
Agree	
Strongly Agree	
Not applicable	
Please identify any support services that you did not receive from the EIS program BEFORE the fellowship started that would have improved your experience.	//
Please identify any support services that you did not receive from the EIS program DURING the past 2 years that would have improved your experience.	
	/

Table 7.5.1.1.a Feedback on General EIS Program Support Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
a) The EIS Handbook was a useful resource.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	Yes	No	No	No	No	No	No	No	No
b) Supervisor orientation provided me with the information I needed to begin supervising my officer.	Strongly Disagree     Disagree     Agree     Strongly Agree     Not Applicable	Yes	No	No	No	No	No	No	No	No
c) The EIS program clearly communicated supervisory expectations before the fellowship started.	Strongly Disagree     Disagree     Agree     Strongly Agree     Not Applicable	Yes	No	No	No	No	No	No	No	No
d) When I had a question or issue to discuss with the EIS program, I knew which person to contact.	Strongly Disagree     Disagree     Agree     Strongly Agree     Not Applicable	Yes	No	No	No	No	No	No	No	No
e) When I had a question or issue to discuss with the EIS program, the question or issue was resolved within a timely manner.	Strongly Disagree     Disagree     Agree     Strongly Agree     Not Applicable	Yes	No	No	No	No	No	No	No	No

Table 7.5.1.1.b Feedback on General EIS Program Support Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
f) I am satisfied with the support received from the EIS program.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	Yes	No	No	No	No	No	No	No	No
If you selected "strongly disagree" or "disagree," please explain in the space provided below.	-	Yes	No	No	No	No	No	No	No	No
Please identify any support services that you did not receive from the EIS program before the fellowship started that would have improved your experience.	-	Yes	No	No	No	No	No	No	No	No
Please identify any support services that you did not receive from the EIS program during the past 2 years that would have improved your experience.	-	Yes	No	No	No	No	No	No	No	No

# 7.5.1.2 Feedback on Supervisor Training

Figure 7.5.1.2.a Feedback on Supervisor Training Fields

Feedback on Supervisor Support & Training
Including this EIS officer, how many EIS officers have you supervised?*
Not including EIS officers, how many other fellows (e.g., ORISE fellows) have you supervised? *
Please indicate your level of agreement: Supervisor seminars provided me with the information needed to supervise my officer throughout the year. *
Strongly Disagree
O Disagree
O Agree
Strongly Agree
I did not attend any supervisor seminars
Please identify any training areas that you did not receive from the EIS program that would have improved your supervisor experience, knowledge, or skills.

Table 7.5.1.2.a Feedback on Supervisor Training Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Including this EIS officer, how many EIS officers have you supervised?	<u>-</u>	Yes	No	No	No	No	No	No	No	No
Not including EIS officers, how many other fellows (e.g., ORISE fellows) have you supervised?	-	Yes	No	No	No	No	No	No	No	No
Please indicate your level of agreement: Supervisor seminars provided me with the information needed to supervise my officer throughout the year.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>I did not attend any supervisor seminars.</li> </ol>	Yes	No	No	No	No	No	No	No	No
If you selected "strongly disagree," "disagree," or "I did not attend any supervisor seminars," please explain in the space provided below.	-	Yes	No	No	No	No	No	No	No	No
Please identify any training areas that you did not receive from the EIS program that would have improved your supervisor experience, knowledge, or skills.	-	Yes	No	No	No	No	No	No	No	No

## 7.5.1.3 Feedback on EIS Officer

Figure 7.5.1.3.a Feedback on EIS Officer Fields

Feedback on EIS Officer	f) My EIS officer demonstrated effective oral communication skills.*
	Strongly Disagree
Thinking about your experience supervising your	<ul><li>Disagree</li></ul>
EIS officer, please indicate your level of agreement	
with each statement.	Strongly Agree
a) My EIS officer provided valuable contributions to our team.*	
Strongly Disagree	g) My EIS officer had a desire to learn and improve. *
○ Disagree	Strongly Disagree
○ Agree	<ul><li>Disagree</li></ul>
Strongly Agree	
b) My EIS officer provided additional epidemiology expertise to our team.*	Strongly Agree
Strongly Disagree	3, 3
○ Disagree	h) My EIS officer was able to quickly adapt to changing needs and priorities. *
O Agree	Strongly Disagree
Strongly Agree	○ Disagree
c) My team has gained knowledge or skills as a result of hosting the EIS officer. $^{\star}$	
Strongly Disagree	Strongly Agree
○ Disagree	g-,g
Agree	:\ M., EIC -ffi
-	i) My EIS officer was effective at solving problems. *
Strongly Agree	Strongly Disagree
-	
Strongly Agree	<ul><li>Strongly Disagree</li><li>Disagree</li></ul>
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree	<ul><li>Strongly Disagree</li><li>Disagree</li><li>Agree</li></ul>
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree Agree	<ul><li>Strongly Disagree</li><li>Disagree</li></ul>
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree	<ul><li>Strongly Disagree</li><li>Disagree</li><li>Agree</li></ul>
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree Agree	Strongly Disagree  Disagree  Agree  Strongly Agree
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree Agree Strongly Agree e) My EIS officer demonstrated effective written communication skills. * Strongly Disagree	<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>j) My EIS officer was able to resolve conflicts effectively. *</li> </ul>
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree Agree Strongly Agree e) My EIS officer demonstrated effective written communication skills. * Strongly Disagree Disagree	Strongly Disagree Disagree Agree Strongly Agree j) My EIS officer was able to resolve conflicts effectively. * Strongly Disagree Disagree
Strongly Agree d) I am satisfied with my EIS officer's contributions to our team. * Strongly Disagree Disagree Agree Strongly Agree e) My EIS officer demonstrated effective written communication skills. * Strongly Disagree	<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>j) My EIS officer was able to resolve conflicts effectively. *</li> <li>Strongly Disagree</li> </ul>

Figure 7.5.1.3.b Feedback on EIS Officer Fields

k) At the end of the fellowship, the EIS officer demonstrated the qualities of a leader. $\ensuremath{^{*}}$
Strongly Disagree
Disagree
Agree
Strongly Agree
Will any of the EIS officer's products or activities listed below continue to benefit your organization after the end of the fellowship? Only include items if the officer made a meaningful contribution to the work. Check all that apply.*
☐ Public health programs or initiatives
Policies or formal guidelines
Scientific publications or presentations
Communication with lay audiences
Data for public health decision making (including creation of registries, surveillance)
Data for continuous quality improvement
□ Training or technical assistance materials (e.g., curricula, job aids)
□ Budgets
☐ Public health information systems
□ Partnerships
■ Improvements to organizational efficiencies (e.g., standard operating procedures)
No lasting effect after service ends
□ Other
Our organization plans to or is the process of: *
Hiring the officer into the immediate work group where the fellowship occurred
Hiring the officer into another work group
<ul> <li>Continuing to work with the officer through a mechanism other than hiring (e.g., contracting, another fellowship, etc.)</li> </ul>
Not retaining the officer through any mechanism
Overall Feedback
Do you plan to serve as a supervisor for another EIS officer in the future? $^{\star}$
<b>v</b>
Please comment on anything else you would like the EIS program to know about your experience supervising an EIS officer.

Table 7.5.1.3.a Feedback on EIS Officer Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
a) The EIS officer provided valuable contributions to the host site.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	Yes	No	No	No	No	No	No	No	No
b) The EIS officer provided additional epidemiology expertise to the host site.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
c) The host site has gained knowledge or skills as a result of hosting the EIS officer.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	Yes	No	No	No	No	No	No	No	No
d) I had a good working relationship with my officer.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	Yes	No	No	No	No	No	No	No	No
e) At the end of the fellowship, the EIS officer demonstrated effective written communication skills.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
f) At the end of the fellowship, the EIS officer demonstrated effective oral communication skills.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
g) At the end of the fellowship, the EIS officer had a desire to learn and improve.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No

Figure 7.5.1.3.b Feedback on EIS Officer Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
h) At the end of the fellowship, the EIS officer was able to quickly adapt to changing needs and priorities.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
i) At the end of the fellowship, the EIS officer was effective at solving problems.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
j) At the end of the fellowship, the EIS officer was able to resolve conflicts effectively.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
k) At the end of the fellowship, the EIS officer demonstrated the qualities of a leader.	Strongly Disagree     Disagree     Agree     Strongly Agree	Yes	No	No	No	No	No	No	No	No
If you selected "strongly disagree" or "disagree," please explain in the space provided below.	-	Yes	No	No	No	No	No	No	No	No

Figure 7.5.1.3.c Feedback on EIS Officer Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
15. Will any of the EIS officer's products or activities listed below continue to benefit your organization after the end of the fellowship? Only include items if the officer made a meaningful contribution to the work. (Check all that apply)	<ol> <li>Public health programs or initiatives</li> <li>Policies or formal guidelines</li> <li>Scientific publications or presentations</li> <li>Communication with lay audiences</li> <li>Data for public health decision making (including creation of registries, surveillance)</li> <li>Data for continuous quality improvement</li> <li>Training or technical assistance materials (e.g., curricula, job aids)</li> <li>Budgets</li> <li>Public health information systems</li> <li>Partnerships</li> <li>Improvements to organizational efficiencies (e.g., standard operating procedures)</li> <li>No lasting effect after service ends</li> <li>Other</li> </ol>	Yes	No	No	No	No	No	No	No	No
Specify:		Yes	No	No	No	No	No	No	No	No
16. Our organization plans to or is the process of:	1. Hiring the officer into the immediate work group where the fellowship occurred 2. Hiring the officer into another work group 3. Continuing to work with the officer through a mechanism other than hiring (e.g., contracting, another fellowship, etc.) 4. Not retaining the officer through any mechanism	Yes	No	No	No	No	No	No	No	No

Figure 7.5.1.3.d Feedback on EIS Officer Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
17. Which of these are reasons why your organization is not planning to hire the officer or continue to work with the officer through another mechanism? (Check all that apply)	1. No position available 2. No funds available 3. Officer is not interested (e.g., accepted another position) 4. Officer does not have the knowledge and skills needed for the work 5. My organization already has the knowledge and skills the officer would bring (i.e., no value added) 6. Personal qualities of the officer (e.g., dependability, work ethic) 7. Other	Yes	No	No	No	No	No	No	No	No
Specify:	-	Yes	No	No	No	No	No	No	No	No
18. Which of these are reasons why your organization is planning to work with your officer? (Check all that apply)	1. Officer has the knowledge and skills needed for the work 2. Officer brings additional knowledge and skills the team would not otherwise have 3. Personal qualities of the officer (e.g., dependability, work ethic) 4. Easier than recruiting for a new person for the position 5. Familiarity with your organization and its work 6. Other	Yes	No	No	No	No	No	No	No	No
Specify:	-	Yes	No	No	No	No	No	No	No	No

#### 7.5.1.4 Overall Feedback

Figure 7.5.1.4.a Overall Feedback Fields

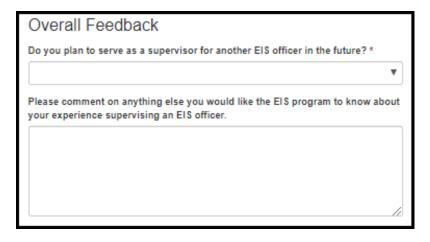


Table 7.5.1.4.a Overall Feedback Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Do you plan to serve as a supervisor for	1. Yes	Yes	No	No	No	No	No	No	No	No
another EIS officer in the future?	2. No									
	3. Undecided									
If you selected "No" or "Undecided,"	-	Yes	No	No	No	No	No	No	No	No
please explain:										
Please comment on anything else you	-	Yes	No	No	No	No	No	No	No	No
would like the EIS program to know										
about your experience supervising an EIS										
officer.										

# 7.5.2 Supervisor Survey

#### 7.5.2.1 Introduction

Figure 7.5.2.1.a Introduction Fields

EIS Supervisor Survey
Introduction
Thank you for serving as a supervisor for the Epidemic Intelligence Service (EIS). This survey will take approximately 5 minutes to complete. Your responses will be kept confidential. Your responses are critical to ensuring program improvements.
Please contact eis@cdc.gov with any questions about this survey.
1. Supervisor Name: *
2. Host Site Name: *

**Table 7.5.2.1.a Introduction Fields** 

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
1. Supervisor Name:	-	Yes	No	No	No	No	No	No	No	No
2. Host Site Name:	-	Yes	No	No	No	No	No	No	No	No

# 7.5.2.2 Feedback on EIS Program Support

Figure 7.5.2.2.a. Feedback on EIS Program Support Fields

Feedback on EIS Program Support	
<ol><li>Thinking about your experience hosting and supervising an EIS officer, please indicate your level of agreement with each statement.</li></ol>	
a) The EIS Handbook is a useful resource. *	
Strongly Disagree	
Disagree	
O Agree	
Strongly Agree	
Not Applicable	
b) Supervisor orientation provided me with the information I needed to begin supervising my officer. *	
Strongly Disagree	
Disagree	
○ Agree	
Strongly Agree	
Not Applicable	
c) The EIS program clearly communicated supervisory expectations before the fellowship started.*	e) When I have a question or issue to discuss with the EIS program, the question or issue is resolved within a timely manner. *
Strongly Disagree	Strongly Disagree
Disagree	O Disagree
○ Agree	○ Agree
Strongly Agree	Strongly Agree
Not Applicable	Not Applicable
d) When I have a question or issue to discuss with the EIS program, I know which person to contact. *	f) I am satisfied with the support that I am receiving from the EIS program. *
Strongly Disagree	Strongly Disagree
O Disagree	Disagree
O Agree	○ Agree
Strongly Agree	<ul> <li>Strongly Agree</li> </ul>
Not Applicable	Not Applicable

Figure 7.5.2.2.b. Feedback on EIS Program Support Fields

4. If you selected "strongly disagree" or "disagree," please explain in the space provided below. *
5. Please identify any support services that you have not received from the EIS program before the fellowship started that would have improved your experience.*
6. Please identify any support services that you have not received from the EIS program during the past year that would have improved your experience.*

Table 7.5.2.2.a. Feedback on EIS Program Support Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
a) The EIS Handbook is a useful resource.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	Yes	No	No	No	No	No	No	No	No
b) Supervisor orientation provided me with the information I needed to begin supervising my officer.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	Yes	No	No	No	No	No	No	No	No
c) The EIS program clearly communicated supervisory expectations before the fellowship started.	Strongly Disagree     Disagree     Agree     Strongly Agree     Not Applicable	Yes	No	No	No	No	No	No	No	No
d) When I have a question or issue to discuss with the EIS program, I know which person to contact.	Strongly Disagree     Disagree     Agree     Strongly Agree     Not Applicable	Yes	No	No	No	No	No	No	No	No

Table 7.5.2.2.b. Feedback on EIS Program Support Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
e) When I have a question or issue to discuss with the EIS program, the question or issue is resolved within a timely manner.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	Yes	No	No	No	No	No	No	No	No
f) I am satisfied with the support that I am receiving from the EIS program.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	Yes	No	No	No	No	No	No	No	No
4. If you selected "strongly disagree" or "disagree," please explain in the space provided below.	-	Yes	No	No	No	No	No	No	No	No
5. Please identify any support services that you have not received from the EIS program before the fellowship started that would have improved your experience.	-	Yes	No	No	No	No	No	No	No	No
6. Please identify any support services that you have not received from the EIS program during the past year that would have improved your experience.	-	Yes	No	No	No	No	No	No	No	No

# 7.5.2.3 Feedback on Supervisor Training

Figure 7.5.2.3.a. Feedback on Supervisor Training Fields

Feedback on Supervisor Training
7. Please indicate your level of agreement: Supervisor seminars provided me with the information needed to supervise my officer throughout the year. *
Strongly Disagree
Disagree
Agree
Strongly Agree
I have not attended any supervisor seminars.
8. If you selected "strongly disagree," "disagree," or "I have not attended any supervisor seminars," please explain in the space provided below. *
9. Please identify any training areas that you have not received from the EIS program that would improve your supervisor experience, knowledge, or skills.*
10. Describe your management style: *

Table 7.5.2.3.a. Feedback on Supervisor Training Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
7. Please indicate your level of agreement:	1. Strongly Disagree	Yes	No	No	No	No	No	No	No	No
Supervisor seminars provided me with the	2. Disagree									
information needed to supervise my officer	3. Agree									
throughout the year.	4. Strongly Agree									
	5. I have not attended any									
	supervisor seminars.									
8. If you selected "strongly disagree," "disagree,"	-	Yes	No	No	No	No	No	No	No	No
or "I have not attended any supervisor										
seminars," please explain in the space provided										
below.										
9. Please identify any training areas that you	-	Yes	No	No	No	No	No	No	No	No
have not received from the EIS program that										
would improve your supervisor experience,										
knowledge, or skills.										
10. Describe your management style:	-	Yes	No	No	No	No	No	No	No	No

#### 7.5.2.4 Overall Feedback

Figure 7.5.2.4.a. Overall Feedback Fields

# Overall Feedback 11. Please comment on anything else you would like the EIS program to know about your experience supervising an EIS officer.\*

Table 7.5.2.4.a. Overall Feedback Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PH-TIPP	PHIFP	PE	ELI	PHAP
11. Please comment on anything else you would like the EIS	-	Yes	No	No	No	No	No	No	No	No	No
program to know about your experience supervising an EIS officer.											

#### 7.5.3 Position Description Survey

#### 7.5.3.1 Introduction

Figure 7.5.3.1.a Introduction Fields

# EIS Position Description Survey CDC Epidemiology Elective **Program Opportunity** CDC Epidemiology Elective students are fourthyear medical and veterinary school students who participate in a 6-8 week rotation at CDC to gain applied experience in preventive medicine, public health, and the principles of applied epidemiology. Are you interested in hosting a CDC Epidemiology Elective Student next year? If you select, "Yes" or "Need More Information" then the EIS Program will send you more information about the CDC Epidemiology Elective Program and provide further guidance. Are you interested in hosting a medical or veterinary student (Select all that apply): Medical Student Veterinary Student Not Interested Would you be interested in hosting a student for 6 or 8 weeks (Select all that apply): \* 6 Weeks 8 Weeks

Table 7.5.3.1.a Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
2. Are you interested in hosting a CDC	1. Yes	Yes	No	No	No	No	No	No	No	No
Epidemiology Elective student next year?	2. No									
3. Are you interested in hosting a medical or	1. Medical Student	Yes	No	No	No	No	No	No	No	No
veterinary student (Select all that apply):	2. Veterinary Student									
	3. Not Interested									
4. Would you be interested in hosting a student	1. 6 weeks	Yes	No	No	No	No	No	No	No	No
for 6 or 8 weeks (Select all that apply):	2. 8 weeks									

#### 7.5.3.2 EIS Officer Professional Category Needs Assessment

Figure 7.5.3.2.a EIS Officer Professional Category Needs Assessment Fields

# EIS Officer Professional Category Needs Assessment

As a program, we want to know about the knowledge and skills that positions prefer officers to have prior to the start of the EIS fellowship. These data will help us think about the knowledge and skills necessary among applicants during the recruitment and selection of future EIS classes.

Note that your preferences will not be shared with incoming officers and will not reduce the number of officers approaching your position in any way. Please also consider that EIS is a training program and that no officer should be required to have all skills at the start of the EIS fellowship. Please answer on behalf of the position that you have submitted, and not about EIS training in general.

professional categories?
Physician *
Highly Suitable ▼
If a Physician is "highly suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Check all that apply.) $^{\star}$
■ Infectious disease
Pediatric infectious disease
☐ Internal medicine
■ Emergency medicine
Family medicine
Obstetrics and gynecology
<ul><li>Pediatrics</li></ul>
□ Surgery
Other
Other (please specify):

Figure 7.5.3.2.b EIS Officer Professional Category Needs Assessment Fields

If a Doctoral Scientist is "highly suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Check all that apply.) $^*$	Veterinarian *  ▼
☐ Epidemiology, general	Nurse *
<ul> <li>Infectious disease epidemiology</li> </ul>	v
Chronic disease epidemiology	
Global or international epidemiology	Pharmacist *
☐ Environmental epidemiology	<b>v</b>
■ Biostatistics	
Behavioral sciences, general	Dentist *
Psychology	v
Social sciences (anthropology, sociology, etc.)	
☐ Social Work	Other licensed healthcare professionals *
☐ Biology, general	▼
Microbiology	In addition to the matrix above, what other professional background(s) are highly
<ul><li>Molecular biology</li></ul>	suitable or suitable for this position?
Nutrition	
□ Veterinary Preventative Medicine	
Public or Community Health	Please provide your rationale for any professional categories as not suitable for
☐ Health Management or policy	your position:
☐ Heath Education	
✓ Other	Is there anything else about the suitability of professional categories of officers
Other (please specify):	you would like for us to know?

Table 7.5.3.2.a EIS Officer Professional Category Needs Assessment Fields

2. Suitable 3. No Preference 4. Not Suitable 9. If a Physician is "highly suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Check all that apply)  Flease List:  1. Infectious disease 2. Pediatric infectious disease 3. Internal medicine 4. Emergency medicine 6. Obstetrics and gynecology 7. Pediatrics 8. Surgery 9. Other  Please List:  1. Highly Suitable 2. Suitable 3. No Preference 4. Not Suitable	Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
or "suitable" for your position, please indicate which of the following areas of study are preferred. (Check all that apply)  Please List:  Doctoral Scientist:  1. Highy Suitable 2. Suitable 3. No Preference 4. The following areas of study are preferred. (Select all that apply)  8. If a Doctoral Scientist is "highly suitable or suitable" for your position, please indicate which of the following areas of study are preferred. (Select all that apply)  1. Epidemiology, general or the following areas of study are preferred. (Select all that apply)  2. Suitable 3. No Preference or the following areas of study are preferred. (Select all that apply)  3. Chromomental epidemiology 4. Global or international epidemiology 5. Environmental epidemiology 6. Blostatistics 7. Behavioral sciences, general 8. Psychology 9. Social sciences (anthropology, sociology, etc.) 10. Social Work 11. Biology, general 12. Microbiology 13. Molecular biology 14. Nutrition 15. Veterinary Preventative Medicine 16. Public or Community Health 17. Health Management or policy 18. Health Management or policy	Physician:	2. Suitable 3. No Preference 4. Not Suitable									
Doctoral Scientist:  1. Highly Suitable 2. Suitable 3. No Preference 4. Not Suitable 3. No Preference 4. Not Suitable 3. Lif a Doctoral Scientist is "highly suitable" for your position, please indicate which of the following areas of study are preferred. (Select all that apply)  S. Environmental epidemiology 6. Biostatistics 7. Behavioral sciences, general 8. Psychology 9. Social sciences (anthropology, sociology, etc.) 10. Social Work 11. Biology, general 12. Microbiology 13. Molecular biology 14. Nutrition 15. Veterinary Preventative Medicine 16. Public or Community Health 17. Health Management or policy 18. Heath Education	or "suitable" for your position, please indicate which of the following areas of study are	2. Pediatric infectious disease 3. Internal medicine 4. Emergency medicine 5. Family medicine 6. Obstetrics and gynecology 7. Pediatrics 8. Surgery	Yes	No	No	No	No	No	No	No	No
2. Suitable 3. No Preference 4. Not Suitable  8. If a Doctoral Scientist is "highly suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Select all that apply)  8. If a Doctoral Scientist is "highly suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Select all that apply)  8. If a Doctoral Scientist is "highly suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Select all that apply)  9. Environmental epidemiology 6. Biostatistics 7. Behavioral sciences, general 8. Psychology 9. Social sciences (anthropology, sociology, etc.) 10. Social Work 11. Biology, general 12. Microbiology 13. Molecular biology 14. Nutrition 15. Veterinary Preventative Medicine 16. Public or Community Health 17. Health Management or policy 18. Heath Education	Please List:	-	Yes	No	No	No	No	No	No	No	No
suitable" or "suitable" for your position, please indicate which of the following areas of study are preferred. (Select all that apply)  5. Environmental epidemiology  6. Biostatistics  7. Behavioral sciences, general  8. Psychology  9. Social sciences (anthropology, sociology, etc.)  10. Social Work  11. Biology, general  12. Microbiology  13. Molecular biology  14. Nutrition  15. Veterinary Preventative Medicine  16. Public or Community Health  17. Health Management or policy  18. Heath Education	Doctoral Scientist:	2. Suitable 3. No Preference	Yes	No	No	No	No	No	No	No	No
	position, please indicate which of the following areas of study are	2. Infectious disease epidemiology 3. Chronic disease epidemiology 4. Global or international epidemiology 5. Environmental epidemiology 6. Biostatistics 7. Behavioral sciences, general 8. Psychology 9. Social sciences (anthropology, sociology, etc.) 10. Social Work 11. Biology, general 12. Microbiology 13. Molecular biology 14. Nutrition 15. Veterinary Preventative Medicine 16. Public or Community Health 17. Health Management or policy 18. Heath Education	Yes	No	No	No	No	No	No	No	No
Please List: - Yes No No No No No No No No No	Please List:	-	Yes	No	No	No	No	No	No	No	No

Figure 7.5.3.2.b EIS Officer Professional Category Needs Assessment Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Veterinarian:	Highly Suitable     Suitable     No Preference     Not Suitable	Yes	No	No	No	No	No	No	No	No
Nurse:	Highly Suitable     Suitable     No Preference     Not Suitable	Yes	No	No	No	No	No	No	No	No
Pharmacist:	Highly Suitable     Suitable     No Preference     Not Suitable	Yes	No	No	No	No	No	No	No	No
Dentist:	<ol> <li>Highly Suitable</li> <li>Suitable</li> <li>No Preference</li> <li>Not Suitable</li> </ol>	Yes	No	No	No	No	No	No	No	No
Other licensed healthcare professionals:	Highly Suitable     Suitable     No Preference     Not Suitable	Yes	No	No	No	No	No	No	No	No
6. In addition to the matrix above, what other professional background(s) are highly suitable or suitable for this position?	-	Yes	No	No	No	No	No	No	No	No
7. Please provide your rationale for any professional categories as not suitable for your position:	-	Yes	No	No	No	No	No	No	No	No
10. Is there anything else about the suitability of professional categories of officers you would like for us to know?	-	Yes	No	No	No	No	No	No	No	No

#### 7.5.3.3 EIS Officer Knowledge and Skills Needs Assessment

Figure 7.5.3.3.a EIS Officer Knowledge and Skills Needs Assessment Fields

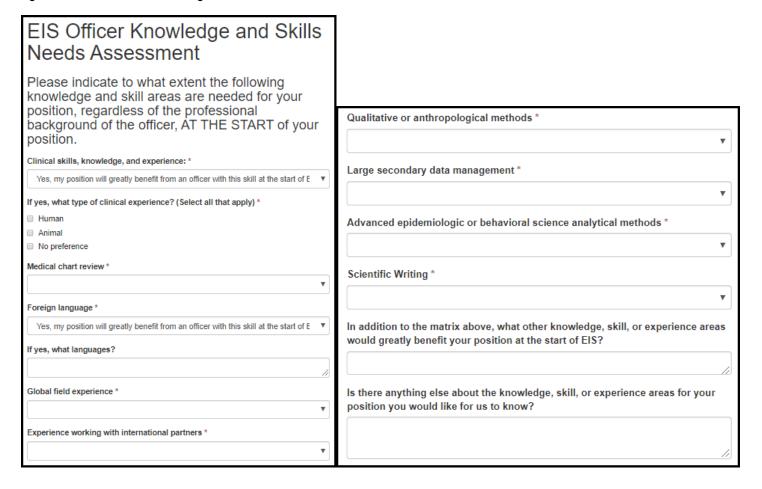


Table 7.5.3.3.a EIS Officer Knowledge and Skills Needs Assessment Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Clinical skills, knowledge, and experience:	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
What type of clinical experience?	1. Human     2. Animal     3. No Preference	Yes	No	No	No	No	No	No	No	No
Medical chart review	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
Foreign language	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
If yes, what languages?	-	Yes	No	No	No	No	No	No	No	No
Global field experience	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No

Table 7.5.3.3.b EIS Officer Knowledge and Skills Needs Assessment Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Experience working with international partners	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
Qualitative or anthropological methods	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS     2. Yes, nice to have for my position     3. No preference     4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
Large secondary data management	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
Advanced epidemiologic or behavioral science analytical methods	1. Yes, my position will greatly benefit from an officer with this skill at the start of EIS 2. Yes, nice to have for my position 3. No preference 4. No, my position does not require this skill from an officer at the start of EIS	Yes	No	No	No	No	No	No	No	No
Scientific writing		Yes	No	No	No	No	No	No	No	No

Figure 7.5.3.3.c EIS Officer Knowledge and Skills Needs Assessment Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
12. In addition to the matrix above, what other knowledge, skill, or experience areas would greatly benefit your position at the start of EIS?	-	Yes	No	No	No	No	No	No	No	No
13. Is there anything else about the knowledge, skill, or experience areas for your position you would like for us to know?	-	Yes	No	No	No	No	No	No	No	No

# 8. Assessments & Evaluations

# 8.1 EEP

# 8.1.1 Supervisor Evaluation of Student Survey

#### 8.1.1.1 General Information

Figure 8.1.1.1.a. General Information Fields

# Supervisor Evaluation of Student Survey

# Introduction

Thank you for hosting a CDC Epidemiology Elective Program (EEP) student! This exit survey should take less than 5 minutes to complete. Please e-mail any questions regarding this survey to epielective@cdc.gov.

# 8.1.1.2 Main Project

# Figure 8.1.1.2.a. Main Project Fields

Main Project
Please indicate your level of agreement with the following statements regarding the student's performance and contributions to the project you assigned to them during the EEP rotation.
The student had knowledge of the public health sciences prior to his/her EEP rotation that contributed to the project. *
Strongly Disagree
<ul><li>Disagree</li></ul>
Neither Agree or Disagree
Agree
Strongly Agree
The student had skills in public health sciences prior to his/her EPP rotation that contributed to the project. $^{\star}$
Strongly Disagree
<ul><li>Disagree</li></ul>
Neither Agree or Disagree
Agree
Strongly Agree
We were able to teach the student new knowledge of public health sciences. $^{\star}$
Strongly Disagree
<ul><li>Disagree</li></ul>
Neither Agree or Disagree
Agree
Strongly Agree
We were able to teach the student new skills in public health sciences.*
Strongly Disagree
<ul> <li>Disagree</li> </ul>
Neither Agree or Disagree
Agree
Strongly Agree
The student contributed to the overall goals of the project. *
Strongly Disagree
<ul><li>Disagree</li></ul>
Neither Agree or Disagree
Agree
Strongly Agree

Table 8.1.1.2.a. Main Project Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
The student had knowledge of the public health sciences prior to his/her EEP rotation that contributed to the project.	1. Strongly Disagree 2. Disagree 3. Neither Agree nor Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No
The student had skills in public health sciences prior to his/her EPP rotation that contributed to the project.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
We were able to teach the student new knowledge of public health sciences.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
We were able to teach the student new skills in public health sciences.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
The student contributed to the overall goals of the project.	1. Strongly Disagree 2. Disagree 3. Neither Agree nor Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No

# 8.1.1.3 Student Professional Skills

Figure 8.1.1.3.a. Student Professional Skills Fields

Student Professional Skills
Please indicate your level of agreement with the following statements regarding the student's performance and skillset.
During the Epidemiology Elective Program rotation, the student
demonstrated the ability to set goals and objectives.*
Strongly Disagree
○ Disagree
Neither Agree or Disagree
○ Agree
Strongly Agree
accomplished necessary tasks and completed assigned work. *
Strongly Disagree
○ Disagree
Neither Agree or Disagree
○ Agree
Strongly Agree
organized and used time efficiently.*
Strongly Disagree
○ Disagree
Neither Agree or Disagree
○ Agree
Strongly Agree
was able to quickly adapt to changing needs and priorities to support the team. *
Strongly Disagree
○ Disagree
Neither Agree or Disagree
Strongly Agree
developed working relationships with a variety of people.*
Strongly Disagree
○ Disagree
Neither Agree or Disagree
○ Agree
Strongly Agree

Table 8.1.1.3.a. Student Professional Skills Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Demonstrated the ability to set goals and objectives.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Accomplished necessary tasks and completed assigned work.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Organized and used time efficiently.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Was able to quickly adapt to changing needs and priorities to support the team.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Developed working relationships with a variety of people.	1. Strongly Disagree 2. Disagree 3. Neither Agree nor Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No

Figure 8.1.1.3.b. Student Professional Skills Fields

contributed positively to the team dynamic. *
<ul> <li>Strongly Disagree</li> </ul>
<ul><li>Disagree</li></ul>
<ul> <li>Neither Agree or Disagree</li> </ul>
<ul><li>Agree</li></ul>
<ul><li>Strongly Agree</li></ul>
demonstrated effective oral communication skills.*
<ul> <li>Strongly Disagree</li> </ul>
<ul><li>Disagree</li></ul>
<ul> <li>Neither Agree or Disagree</li> </ul>
<ul><li>Agree</li></ul>
Strongly Agree
demonstrated effective written communication skills. *
<ul> <li>Strongly Disagree</li> </ul>
<ul><li>Disagree</li></ul>
<ul> <li>Neither Agree or Disagree</li> </ul>
<ul><li>Agree</li></ul>
Strongly Agree
was effective at solving problems.*
<ul> <li>Strongly Disagree</li> </ul>
<ul><li>Disagree</li></ul>
<ul> <li>Neither Agree or Disagree</li> </ul>
<ul><li>Agree</li></ul>
Strongly Agree
presented innovative ideas in a professional manner. *
<ul> <li>Strongly Disagree</li> </ul>
<ul> <li>Disagree</li> </ul>
<ul> <li>Neither Agree or Disagree</li> </ul>
Strongly Agree

Table 8.1.1.3.b. Student Professional Skills Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Contributed positively to the team dynamic.	1. Strongly Disagree	No	No	No	Yes	No	No	No	No	No
	2. Disagree									
	3. Neither Agree nor									
	Disagree									
	4. Agree									
	5. Strongly Agree									
Demonstrated effective oral communication skills.	1. Strongly Disagree	No	No	No	Yes	No	No	No	No	No
	2. Disagree									
	3. Neither Agree nor									
	Disagree									
	4. Agree									
	5. Strongly Agree									
Demonstrated effective written communication	1. Strongly Disagree	No	No	No	Yes	No	No	No	No	No
skills.	2. Disagree									
	3. Neither Agree nor									
	Disagree									
	4. Agree									
	5. Strongly Agree									
Was effective at solving problems.	1. Strongly Disagree	No	No	No	Yes	No	No	No	No	No
	2. Disagree									
	3. Neither Agree nor									
	Disagree									
	4. Agree									
	5. Strongly Agree									
Presented innovative ideas in a professional	1. Strongly Disagree	No	No	No	Yes	No	No	No	No	No
manner.	2. Disagree									
	3. Neither Agree nor									
	Disagree									
	4. Agree									
	5. Strongly Agree									

Figure 8.1.1.3.c. Student Professional Skills Fields

was able to evaluate personal effort and the work of others.*
Strongly Disagree
<ul><li>Disagree</li></ul>
Neither Agree or Disagree
○ Agree
Strongly Agree
was able to take and respond to constructive criticism. *
Strongly Disagree
<ul><li>Disagree</li></ul>
Neither Agree or Disagree
○ Agree
Strongly Agree
displayed qualities of a future leader. *
displayed qualities of a future leader. *  Strongly Disagree
Strongly Disagree
<ul><li>Strongly Disagree</li><li>Disagree</li></ul>
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> </ul>
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> </ul>
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ul>
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>overall demonstrated skills need to enter the public health profession.*</li> </ul>
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>overall demonstrated skills need to enter the public health profession.*</li> <li>Strongly Disagree</li> </ul>
<ul> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree or Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>overall demonstrated skills need to enter the public health profession.*</li> <li>Strongly Disagree</li> <li>Disagree</li> </ul>

Table 8.1.1.3.c. Student Professional Skills Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Was able to evaluate personal effort and the work of others.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Neither Agree nor Disagree</li> <li>Agree</li> <li>Strongly Agree</li> </ol>	No	No	No	Yes	No	No	No	No	No
Was able to take and respond to constructive criticism.	Strongly Disagree     Disagree     Neither Agree nor     Disagree     Agree     Strongly Agree	No	No	No	Yes	No	No	No	No	No
Displayed qualities of a future leader.	1. Strongly Disagree 2. Disagree 3. Neither Agree nor Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No
Overall demonstrated skills need to enter the public health profession.	1. Strongly Disagree 2. Disagree 3. Neither Agree nor Disagree 4. Agree 5. Strongly Agree	No	No	No	Yes	No	No	No	No	No

# **8.1.1.4** Future Considerations

Figure 8.1.1.4.a. Future Consideration Fields

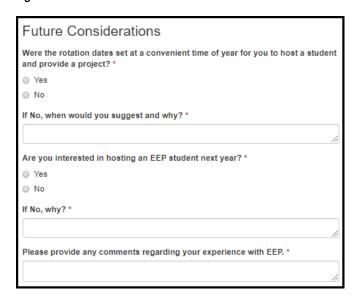


Table 8.1.1.4.a. Future Consideration Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Were the rotation dates set at a convenient time of year for you	1. Yes	No	No	No	Yes	No	No	No	No	No
to host a student and provide a project?	2. No									
If No, when would you suggest and why?	-	No	No	No	Yes	No	No	No	No	No
Are you interested in hosting an EEP student next year?	1. Yes	No	No	No	Yes	No	No	No	No	No
	2. No									
If No, why?	-	No	No	No	Yes	No	No	No	No	No
Please provide any comments regarding your experience with	-	No	No	No	Yes	No	No	No	No	No
EEP.										

# 8.1.2 Project Review

Figure 8.1.2.a. Project Review Fields

EEP Project Review	I concur that the Intercultural Sensitivity Competency requirements for this Project: *
What Competencies has the Student listed for this project? *  Systems Thinking Public Health Sciences Analytic Assessment Community Dimensions of Practice Intercultural Sensitivity	<ul> <li>Have been met for this Project</li> <li>Have NOT been met for this Project</li> <li>Project is still In Progress</li> <li>Need Further Information</li> <li>I concur that the Communication Competency requirements for this Project: *</li> </ul>
Communication  I concur that the Systems Thinking Competency requirements for this Project:  Have been met for this Project Have NOT been met for this Project Project is still in Progress Need Further Information	<ul> <li>Have been met for this Project</li> <li>Have NOT been met for this Project</li> <li>Project is still In Progress</li> <li>Need Further Information</li> </ul>
I concur that the Public Health Sciences Competency requirements for this Project: *  Have been met for this Project	Missing Requirements: *
Have NOT been met for this Project     Project is still In Progress     Need Further Information	Additional Information Needed: *
I concur that the Analytic Assessment Competency requirements for this Project: *  Have been met for this Project Have NOT been met for this Project Project is still In Progress	General Comments or Feedback:
Need Further Information  I concur that the Community Dimensions of Practice Competency requirements for this Project: *  Have been met for this Project Have NOT been met for this Project Project is still in Progress	Overall Status  I concur that the overall status of this Project is: *  Project In Progress
Need Further Information	Completed and meets all Competencies listed above

Table 8.1.2.a. Project Review Fields

Field Name	Values	EIS	LLS	EEP	SAF	PHIFP	PE	ELI	PHAP
What competencies has the student listed for this project?	1. Systems Thinking 2. Public Health Sciences 3. Analytic Assessment 4. Community Dimensions of Practice 5. Intercultural Sensitivity 6. Communication	No	No	Yes	No	No	No	No	No
I concur that the competency requirements for this project:	1. Have been met for this Project 2. Have NOT been met for this Project 3. Project is still In Progress 4. Need Further Information	No	No	Yes	No	No	No	No	No
Missing requirements:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Additional information needed:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
General comments or feedback:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
I concur that the overall status of this project is:	<ol> <li>Project in Progress</li> <li>Completed and meets all the Competencies listed above</li> </ol>	No	No	Yes	No	No	No	No	No

# 8.2 LLS

# 8.2.1 Fellow Assessment

Figure 8.2.1.a. Fellow Assessment Fields

LLS Fellow Assessment	
Provide a response to the following statements about your fellow:	
Fellow will meet the Core Activities of Learning (CALs) during this LLS assignment: *	
Strongly Disagree	
Disagree	
Neutral	
O Agree	
Strongly Agree	
If you disagree with any statement listed above, please provide comments for why you disagree: *	
	/
What concerns do you have or challenges do you anticipate in the next 6 months?*	
	/
What changes or additions to support would you like to see from the LLS Program? Why?*	
	/

Table 8.2.1.a. Fellow Assessment Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Fellow will meet the Core Activities of Learning (CALs) during this LLS assignment	Strongly Disagree     Disagree     Neutral     Agree     Strongly Agree	No	Yes	No	No	No	No	No	No	No
If you disagree with any statement listed above, please provide comments for why you disagree:	-	No	Yes	No	No	No	No	No	No	No
What concerns do you have or challenges do you anticipate in the next 6 months?	-	No	Yes	No	No	No	No	No	No	No
What changes or additions to support would you like to see from the LLS Program? Why?	-	No	Yes	No	No	No	No	No	No	No

#### 8.2.2 6-Month CAL Assessment

#### 8.2.2.1 Section I.

#### Figure 8.2.2.1.a. CAL 1 Fields

# LLS 6 Month CAL (Core Activities of Learning) Assessment

#### Introduction

As the supervisor of an LLS Fellow, you are in a key role for providing guidance to your fellow for achieving the assigned LLS Core Activities of Learning (CALs) and updates to the LLS program every six months on the fellow's progress.

This purpose of this form is to assess the LLS CALs through observation and discussion with your fellow.

This is an internal LLS Program document and will not be shared with others outside the Program. The Program will only use the information collected to ensure all LLS fellows are progressing in their assignments and to determine if there is a need for CAL revisions.

#### Section I.

The following list contains the CALs for the Class of 2016 LLS fellows.

- Conduct applied laboratory research to address a public health or safety-related issue.
- Conduct a safety risk assessment to evaluate the probability and potential consequences of exposure to a given hazard.
- 3. Evaluate a quality management system.
- 4. Incorporate bioinformatics principles into applied public health laboratory science
- 5. Give a 10-20 minute oral presentation to a scientific audience.
- Give an in depth public health talk on the fellow's original LLS work or field of study.
- Write and submit, as first author, a scientific manuscript for a peer-reviewed journal.
- 8. Participate in laboratory operations management
- 9. Communicate complex scientific concepts to an external lay audience.
- 10. Provide service to the agency (laboratory or CDC-wide).

For each of the CALs list the associated activities as evidence, comment on strengths and areas for growth, and document the fellow's progress.

An example of a strength: LLS Fellow is able to perform a detailed risk assessment with minimal lab data.

An example of an area for growth: When LLS Fellow receives conflicting guidance from primary and secondary supervisor or project supervisor, the LLS Fellow should identify the conflict and share the information appropriately.

Activities: Describe the activities associated with this CAL. *	
Activities: Describe the activities associated with this CAL.	
Topic: What is the public health or safety issue?*	
Status: What is the status of this CAL?*	
○ 0%	
○ 25%	
o 50%	
○ 75%	
O 100%	
If Status is "Not Started " state why: *	
Strength(s): What are some of the fellow's strengths in achievi competencies associated with this CAL? *	ng the
Area(s) for Growth: What are some areas for growth in achievin	ng the

Table 8.2.2.1.a. CAL 1 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.b. CAL 2 Fields

CAL 2: Conduct a safety risk assessment to evaluate the probability and potential consequences of exposure to a given hazard.	
Activities: Describe the activities associated with this CAL. *	
Topic: What is the public health or safety issue? *	٥
Status: What is the status of this CAL?*	J
O 0%	
© 25%	
o 50%	
o 75%	
■ 100%	
If Status is "Not Started" state why: *	
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *	
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? *	

Table 8.2.2.1.b. CAL 2 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.c. CAL 3 Fields

CAL 3: Evaluate a quality management system.
Activities: Describe the activities associated with this CAL.*
Topic: What is the public health or safety issue? *
Status: What is the status of this CAL?*
○ 0%
© 25%
o 50%
o 75%
O 100%
If Status is "Not Started " state why: *
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? *

Table 8.2.2.1.c. CAL 3 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.d. CAL 4 Fields

CAL 4: Incorporate bioinformatics principles into applied public health laboratory science	
Activities: Describe the activities associated with this CAL. *	
	/
Topic: What is the public health or safety issue? *	
Status: What is the status of this CAL?*	
<ul><li>Not Started</li></ul>	
In Progress	
<ul><li>Completed</li></ul>	
If Status is "Not Started " state why: *	
	/
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *	
	/
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? *	
	//

Table 8.2.2.1.d. CAL 4 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
Topic: What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. Not Started 2. In Progress 3. Completed	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

### Figure 8.2.2.1.e. CAL 5 Fields

CAL 5: Give a 10–20 minute oral presentation to a scientific audience.
Activities: Describe the activities associated with this CAL. *
Topic: What is the public health or safety issue?*
Topic: what is the public health of safety issue?
Status: What is the status of this CAL?*
○ 0%
O 25%
○ <b>5</b> 0%
0 75%
0 100%
If Status is "Not Started " state why: *
Characteristics with a second of the fellowing of the second of the seco
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? $^\ast$
If CAL has been completed, please provide the following information:
Presentation Title:
Event or Conference (e.g., EIS Conference):
Approximate Number of Attendees:
Please contact LLS program if the presentation was not given at a scientific conference.

Table 8.2.2.1.e. CAL 5 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1.0%	No	Yes	No	No	No	No	No	No	No
	2. 25%									
	3. 50%									
	4. 75%									
	5. 100%									
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the	-	No	Yes	No	No	No	No	No	No	No
competencies associated with this CAL?										
Area(s) for Growth: What are some areas for growth in achieving the	-	No	Yes	No	No	No	No	No	No	No
competencies associated with this CAL?										
Presentation Title:	-	No	Yes	No	No	No	No	No	No	No
Event or Conference (e.g., EIS Conference):	-	No	Yes	No	No	No	No	No	No	No
Approximate Number of Attendees:	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.f. CAL 6 Fields

CAL 6: Give an in depth public health talk on the fellow's original LLS work or field of study.	
Activities: Describe the activities associated with this CAL. *	
	/
Topic: What is the public health or safety issue?*	
Status: What is the status of this CAL? *	
○ 0%	
O 25%	
o 50%	
o 75%	
0 100%	
If Status is "Not Started " state why: *	
	1
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *	
	1
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? $^{\star}$	
	/
If CAL has been completed, please provide the following information:	
Presentation Title:	
Event or Conference (e.g., EIS Conference):	_
Approximate Number of Attendees:	

Table 8.2.2.1.f. CAL 6 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
Topic: What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1.0%	No	Yes	No	No	No	No	No	No	No
	2. 25%									
	3. 50%									
	4. 75%									
	5. 100%									
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the	-	No	Yes	No	No	No	No	No	No	No
competencies associated with this CAL?										
Area(s) for Growth: What are some areas for growth in achieving the	-	No	Yes	No	No	No	No	No	No	No
competencies associated with this CAL?										
Presentation Title:	-	No	Yes	No	No	No	No	No	No	No
Event or Conference (e.g., EIS conference):	-	No	Yes	No	No	No	No	No	No	No
Approximate Number of Attendees	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.g. CAL 7 Fields

cal 7: Write and submit, as first author, a scientific manuscript for a peer-reviewed journal	
Activities: Describe the activities associated with this CAL. *	
	_//
Topic: What is the public health or safety issue? *	
Status: What is the status of this CAL? *	
○ 0%	
© 25%	
O 50%	
o 75%	
○ 100%	
If Status is "Not Started" state why: *	
Clearance Submission: When was the manuscript submitted to clearance? *	
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *	
	//
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? $^\star$	
If manuscript has been published, provide the following information::	
Manuscript Title: *	
Name of Journal: *	
Citation: *	
	_//

Table 8.2.2.1.g. CAL 7 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1.0%	No	Yes	No	No	No	No	No	No	No
	2. 25%									
	3. 50%									
	4. 75%									
	5. 100%									
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Clearance Submission: When was the manuscript submitted to clearance?	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the	-	No	Yes	No	No	No	No	No	No	No
competencies associated with this CAL?										
Area(s) for Growth: What are some areas for growth in achieving the	-	No	Yes	No	No	No	No	No	No	No
competencies associated with this CAL?										
Manuscript Title:	-	No	Yes	No	No	No	No	No	No	No
Name of Journal:	-	No	Yes	No	No	No	No	No	No	No
Citation:	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.h. CAL 8 Fields

CAL 8: Participate in laboratory operations
management
Activities: Describe the activities associated with this CAL. *
Topic: What is the public health or safety issue? *
Status: What is the status of this CAL?*
Not Started
In Progress
<ul> <li>Completed</li> </ul>
If Status is "Not Started " state why: *
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? *

Figure 8.2.2.1.h. CAL 8 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
Topic: What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. Not Started 2. In Progress 3. Completed	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.i. CAL 9 Fields

CAL 9: Communicate complex scientific concepts
to an external lay audience.
Activities: Describe the activities associated with this CAL.*
Topic: What is the public health or safety issue? *
Status: What is the status of this CAL?*
0.0%
25%
0 50%
o 75%
o 100%
If Status is "Not Started " state why: *
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? $^{\star}$

Table 8.2.2.1.i. CAL 9 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.1.j. CAL 10 Fields

CAL 10: Provide service to the agency (laboratory or CDC-wide).	ı
Activities: Describe the activities associated with this CAL. *	
Topic: What is the public health or safety issue? *	
Status: What is the status of this CAL?*	
Not Started	
In Progress	
<ul> <li>Completed</li> </ul>	
If Status is "Not Started " state why: *	
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL? *	
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL? *	

Table 8.2.2.1.j. CAL 10 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities associated with this CAL.	-	No	Yes	No	No	No	No	No	No	No
<u>Topic:</u> What is the public health or safety issue?	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this CAL?	1. Not Started 2. In Progress 3. Completed	No	Yes	No	No	No	No	No	No	No
If Status is "Not Started " state why:	-	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this CAL?	-	No	Yes	No	No	No	No	No	No	No

# 8.2.2.2 Section II.

Figure 8.2.2.2.a. Project 1 Fields

Section II.
Please list any additional projects and/or other activities of note that the fellow has completed or is involved with at this time.
Project 1
Activities: Describe the activities of this project. *
Status: What is the status of this project?*
○ 0%
© 25%
○ 50%
© 75%
O 100%
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this project? *
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this project?*

Table 8.2.2.2.a. Project 1 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities of this project.	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this project?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this project?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this project?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.2.b. Project 2 Fields

Project 2	
Activities: Describe the activities of this project. *	
Status: What is the status of this project? *	
○ 0%	
O 25%	
○ 75%	
<b>0</b> 100%	
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this project? *	
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this project? *	

Table 8.2.2.2.b. Project 2 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities of this project.	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this project?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this project?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this project?	-	No	Yes	No	No	No	No	No	No	No

Figure 8.2.2.2.c. Project 3 Fields

Project 3	
Activities: Describe the activities of this project. *	
Status: What is the status of this project? *	
0%	
O 25%	
○ 50%	
O 75%	
○ 100%	
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this project? *	
	/
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this project? *	
	7

Table 8.2.2.2.c. Project 3 Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Activities: Describe the activities of this project.	-	No	Yes	No	No	No	No	No	No	No
Status: What is the status of this project?	1. 0% 2. 25% 3. 50% 4. 75% 5. 100%	No	Yes	No	No	No	No	No	No	No
Strength(s): What are some of the fellow's strengths in achieving the competencies associated with this project?	-	No	Yes	No	No	No	No	No	No	No
Area(s) for Growth: What are some areas for growth in achieving the competencies associated with this project?	-	No	Yes	No	No	No	No	No	No	No

### 8.2.3 Activity Review

Figure 8.2.3.a. Activity Review Fields

LLC Activity Deview	
LLS Activity Review	I concur that the Long Presentation CAL requirements for this Activity: *
	Have been met for this Activity
What CAL(s) has the Fellow listed for this activity? *	Have NOT been met for this Activity
<ul> <li>Applied Laboratory Research</li> </ul>	Activity is still In Progress
☐ Safety Risk Assessment	Need Further Information
<ul> <li>Quality Management System Evaluation</li> </ul>	
<ul> <li>Long Presentation</li> </ul>	I concur that the Short Presentation CAL requirements for this Activity: *
Short Presentation	Have been met for this Activity
Peer-reviewed Manuscript	Have NOT been met for this Activity
Bioinformatics	Activity is still In Progress
Laboratory Operations Management	Need Further Information
Lay Audience	
Service to Agency	I concur that the Peer-reviewed Manuscript CAL requirements for this Activity: *
I concur that the Applied Laboratory Research CAL requirements for this	Have been met for this Activity
Activity: *	Have NOT been met for this Activity
Have been met for this Activity	Activity is still In Progress
Have NOT been met for this Activity	Need Further Information
Activity is still In Progress	Language that the District and the CAL and the second for this And the second
Need Further Information	I concur that the Bioinformatics CAL requirements for this Activity: *
I concur that the Safety Risk Assessment CAL requirements for this Activity: *	Have been met for this Activity
Have been met for this Activity	<ul> <li>Have NOT been met for this Activity</li> </ul>
Have NOT been met for this Activity	Activity is still In Progress
Activity is still In Progress	Need Further Information
Need Further Information	
I concur that the Quality Management System Evaluation CAL requirements for	I concur that the Laboratory Operations Management CAL requirements for this Activity: *
this Activity: *	•
Have been met for this Activity	Have been met for this Activity
Have NOT been met for this Activity	Have NOT been met for this Activity
Activity is still In Progress	Activity is still In Progress
Need Further Information	Need Further Information

#### Figure 8.2.3.b. Activity Review Fields

I concur that the Lay Audience CAL requirements for this Activity: *
Have been met for this Activity
Have NOT been met for this Activity
Activity is still In Progress
Need Further Information
I concur that the Service to Agency CAL requirements for this Activity: *
Have been met for this Activity
Have NOT been met for this Activity
Activity is still In Progress
Need Further Information
Missing Requirements: *  Additional Information Needed: *  General Comments or Feedback:
General Comments or Feedback:
Overall Status
I concur that the overall status of this Activity is: *
Activity In Progress
Completed and meets all the CALs listed above

Table 8.2.3.a. Activity Review Fields

Field Name	Values	EIS	LLS	EEP	SAF	PHIFP	PE	ELI	PHAP
What CALs has the Fellow listed for this activity?	1. Applied Laboratory Research 2. Safety Risk Assessment 3. Quality Management System Evaluation 4. Long Presentation 5. Short Presentation 6. Peer-reviewed Manuscript 7. Bioinformatics 8. Laboratory Operations Management 9. Lay Audience 10. Service to Agency	No	Yes	No	No	No	No	No	No
I concur that the CAL requirements for this Activity:	Have been met for this Activity     Have NOT been met for this Activity     Activity is still In Progress     Need Further Information	No	Yes	No	No	No	No	No	No
Missing Requirements:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Additional Information Needed:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
General Comments or Feedback:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
I concur that the overall status of this Activity is:	Activity in Progress     Completed and meets all the CALs listed above	No	Yes	No	No	No	No	No	No

#### 8.3 PE

### 8.3.1 Supervisor Evaluation of PE Fellow - End of Year 1 and Year 2

#### 8.3.1.1 Introduction

Figure 8.3.1.1.a. Introduction Fields

PE Fellow Supervisor Evaluation of PE Fellow – End of Year One and Year Two
A critical element of the CDC Steven M. Teutsch Prevention Effectiveness Fellowship's professional development is a PE Fellow's successful performance in both the didactic and experiential areas of training. This performance evaluation is a competency-based assessment of the PE Fellow's performance. Please complete this evaluation based on the PE Fellow's performance and professionalism observed during their two year PE Fellowship.
Please complete this evaluation by June xx, 20xx.
Supervisor:
Assignment CIO:

Table 8.3.1.1.a. Introduction Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Supervisor:	-	No	No	No	No	No	No	Yes	No	No
Assignment CIO:	-	No	No	No	No	No	No	Yes	No	No

#### 8.3.1.2 Development of Competencies

Figure 8.3.1.2.a. Analytic / Assessment Skills Fields

Development of Competencies
Indicate your assessment of the PE Fellow's general proficiency in each competency domain on a scale of 1 to 5, with 5 being the highest.
Related to the competency domain, briefly comment on:
<ul> <li>Particular strengths of the PE Fellow</li> <li>Areas in need of special attention and/or areas of growth during PE Fellowship</li> </ul>
According to each competency domain, the PE Fellow will be able to:
Analytic / Assessment Skills
<ul> <li>Explain prevention effectiveness research (e.g., economic analysis, health services research, policy analysis, operations research) methods.</li> <li>Conduct prevention effectiveness research of, or to inform, public health programs, policies, or problems.</li> <li>Explain epidemiology methods, studies, and investigations.</li> </ul>
Proficiency: *
1 - Basic Proficiency
◎ 2-
○ 3 -
O 4 -
5 - Advanced Proficiency
Strengths of the PE Fellow: *
Areas in need of special attention and/or areas of growth during PE Fellowship: *

Table 8.3.1.2.a. Analytic / Assessment Skills Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Proficiency:	1. 1 - Basic Proficiency 2. 2 - 3. 3 - 4. 4 - 5. 5 - Advanced Proficiency	No	No	No	No	No	No	Yes	No	No
Strengths of the PE Fellow:	-	No	No	No	No	No	No	Yes	No	No
Areas in need of special attention and/or areas of growth during PE Fellowship:	-	No	No	No	No	No	No	Yes	No	No

Figure 8.3.1.2.b. Policy Assessment and Communication Fields

Policy Assessment and Communication
<ul> <li>Describe the health policy assessment and development process.</li> <li>Articulate public health policy recommendations.</li> </ul>
Proficiency: *
1 - Basic Proficiency
◎ 2-
◎ 3-
© 4-
5 - Advanced Proficiency
Strengths of the PE Fellow: *
Areas in need of special attention and/or areas of growth during PE Fellowship: *

Figure 8.3.1.2.b. Policy Assessment and Communication Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Proficiency:	1. 1 - Basic Proficiency 2. 2 - 3. 3 - 4. 4 - 5. 5 - Advanced Proficiency	No	No	No	No	No	No	Yes	No	No
Strengths of the PE Fellow:	-	No	No	No	No	No	No	Yes	No	No
Areas in need of special attention and/or areas of growth during PE Fellowship:	-	No	No	No	No	No	No	Yes	No	No

Figure 8.3.1.2.c. Interpersonal and Professional Communication Fields

Interpersonal and Professional Communication
Communicate public health information with individuals and organizations.
Proficiency: *
1 - Basic Proficiency
◎ 2-
◎ 3-
O 4-
5 - Advanced Proficiency
Strengths of the PE Fellow: *
Areas in need of special attention and/or areas of growth during PE Fellowship: *

Table 8.3.1.2.c. Interpersonal and Professional Communication Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Proficiency:	1. 1 - Basic Proficiency 2. 2 - 3. 3 - 4. 4 - 5. 5 - Advanced Proficiency	No	No	No	No	No	No	Yes	No	No
Strengths of the PE Fellow:	-	No	No	No	No	No	No	Yes	No	No
Areas in need of special attention	-	No	No	No	No	No	No	Yes	No	No
and/or areas of growth during PE										
Fellowship:										

Figure 8.3.1.2.d. Foundations for Leadership Fields

Foundations for Leadership
<ul> <li>Demonstrate self-awareness and self-management strategies to accomplish job duties.</li> <li>Collaborate with others to accomplish job duties</li> <li>Demonstrate effective action and organizational strategies to accomplish job duties.</li> </ul>
Proficiency: *
1 - Basic Proficiency
◎ 2-
◎ 3-
<b>0</b> 4-
5 - Advanced Proficiency
Strengths of the PE Fellow: *
Areas in need of special attention and/or areas of growth during PE Fellowship: *

Table 8.3.1.2.d. Foundations for Leadership Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Proficiency:	1. 1 - Basic Proficiency 2. 2 - 3. 3 - 4. 4 - 5. 5 - Advanced Proficiency	No	No	No	No	No	No	Yes	No	No
Strengths of the PE Fellow:	-	No	No	No	No	No	No	Yes	No	No
Areas in need of special attention and/or areas of growth during PE Fellowship:	-	No	No	No	No	No	No	Yes	No	No

### 8.3.1.3 Leadership Inventory

Figure 8.3.1.3.a. Leadership Inventory Fields

Leadership Inventory
Please review the statements below and assess your PE Fellow's capabilities.
Self-Awareness and Leadership Presence
Displaying confidence, commitment, and passion in day-to-day actions: *
Very Weak
Weak
Average
Strong
Very Strong
Prioritizing activities and managing timelines and deadlines: *
Very Weak
Weak
Average
Strong
Very Strong
Making significant changes in my behavior when necessary: *
Very Weak
Weak
Average
Strong
Very Strong

Table 8.3.1.3.a. Leadership Inventory Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Displaying confidence, commitment, and passion in day-to-day actions:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Prioritizing activities and managing timelines and deadlines:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Making significant changes in my behavior when necessary:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No

Figure 8.3.1.3.b. Leadership Inventory Fields

Collaboration, Relationship Management, and Influencing	Navigating Organizational Culture and Change
Listening and communicating clearly and effectively: *  Very Weak  Weak  Average  Strong  Very Strong	Displaying flexibility in adapting to changing or ambiguous situations or overcoming obstacles: *  Very Weak  Weak  Average  Strong  Very Strong
Managing conflict and differences of opinion between myself and others or among others: *  Very Weak  Weak  Average  Strong  Very Strong	Managing the administrative and bureaucratic tensions of the workplace: *  Very Weak  Weak  Average  Strong  Very Strong  Keeping issues and challenges in context while maintaining a balanced
Working effectively as a team member: *  Very Weak  Weak  Average  Strong  Very Strong	viewpoint: *  Very Weak  Weak  Average  Strong  Very Strong

Table 8.3.1.3.b. Leadership Inventory Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Listening and communicating clearly and effectively:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Managing conflict and differences of opinion between myself and others or among others:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Working effectively as a team member:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Displaying flexibility in adapting to changing or ambiguous situations or overcoming obstacles:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Managing the administrative and bureaucratic tensions of the workplace:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Keeping issues and challenges in context while maintaining a balanced viewpoint:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No

### 8.3.1.4 Progress on Performance Requirements

Figure 8.3.1.4.a. Progress on Performance Requirements Fields

Progress on Performance Requirements
Please comment on your PE Fellow's accomplishment of the following performance requirements:
A. Develop two scientific papers suitable for publication: *
B. Deliver two scientific presentations: *
C. Deliver two methods-based educational sessions: *
D. Develop one policy brief based on a policy issue relevant to the host CIO: *

Table 8.3.1.4.a. Progress on Performance Requirements Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
A. Develop two scientific papers suitable for	-	No	No	No	No	No	No	Yes	No	No
publication:										
B. Deliver two scientific presentations:	-	No	No	No	No	No	No	Yes	No	No
C. Deliver two methods-based educational	-	No	No	No	No	No	No	Yes	No	No
sessions:										
D. Develop one policy brief based on a policy	-	No	No	No	No	No	No	Yes	No	No
issue relevant to the host CIO:										

#### 8.3.1.5 Overall Performance

Figure 8.3.1.5.a. Overall Performance Fields

Overall Performance
Using a scale of 1-5, indicate your assessment of the PE Fellow's overall performance in terms of the competencies listed above AND the PE Fellow's completion of the PE Fellowship Performance Requirements. Written comments strongly encouraged:
Overall Proficiency *
Very Weak
○ Weak
O Average
<ul><li>Strong</li></ul>
O Very Strong
Overall Comments (What are your PE Fellow's strengths? How has the PE Fellow improved?): $^{\circ}$
li di

Table 8.3.1.5.a. Overall Performance Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Overall Proficiency:	1. Very Weak 2. Weak 3. Average 4. Strong 5. Very Strong	No	No	No	No	No	No	Yes	No	No
Overall Comments (What are your PE Fellow's strengths? How has the PE Fellow improved?):	-	No	No	No	No	No	No	Yes	No	No

#### 8.3.1.6 Statement of Value

Figure 8.3.1.6.a. Statement of Value Fields

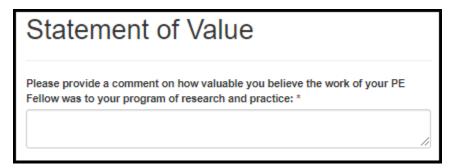


Table 8.3.1.6.a. Statement of Value Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Please provide a comment on how valuable	-	No	No	No	No	No	No	Yes	No	No
you believe the work of your PE Fellow was to										
your program of research and practice:										

## 8.3.2 Accomplishment Review

Figure 8.3.2.a. Accomplishment Review Fields

What Competencies has the Fellow listed for this Accomplishment?*  Analytic / Assessment Skills  Policy / Assessment Accomplishment of missing and Professional Communication  Interpersonal and Professional Communication  Foundations for Leadership  Looncur that the Analytic / Assessment Skills Competency requirements for this Accomplishment:*  Have been met for this Project  Have NOT bee	PE Accomplishment Review	
Accomplishment: *  Have been met for this Project Have NOT been met for this Project Need Further Information I concur that the Policy Assessment and Communication Competency requirements for this Accomplishment: * Have been met for this Project Have NOT been met for this Project Have NOT been met for this Project Have NoT been met for this Project Have been met for this Project Project is still in Progress Need Further Information I concur that the Interpersonal and Professional Communication Competency requirements for this Accomplishment: * Have been met for this Project Project is still in Progress Need Further Information I concur that the Foundations for Leadership Competency requirements for this Accomplishment: * Have been met for this Project Project is still in Progress Project in Progress Project in Progress Project in Progress	Analytic / Assessment Skills     Policy Assessment and Communication     Interpersonal and Professional Communication	
Project is still in Progress Need Further Information I concur that the Policy Assessment and Communication Competency requirements for this Accomplishment: *  Have been met for this Project Project is still in Progress Need Further Information I concur that the Interpersonal and Professional Communication Competency requirements for this Accomplishment: *  Have been met for this Project Have NOT been met for this Project Project is still in Progress Need Further Information I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *  Have been met for this Project Project is still in Progress I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *  I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *  I concur that the overall status of this Accomplishment is: * Project is still in Progress	Accomplishment: *  • Have been met for this Project	
requirements for this Accomplishment: *  Have been met for this Project Have NOT been met for this Project Project is still In Progress Need Further Information  I concur that the Interpersonal and Professional Communication Competency requirements for this Accomplishment: *  Have been met for this Project Project is still In Progress Need Further Information  I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *  Have been met for this Project Project is still In Progress  I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *  Have been met for this Project Project is still In Progress  I concur that the overall status of this Accomplishment is: *  Project In Progress	Project is still In Progress	Missing Requirements: *
Have NOT been met for this Project Project is still In Progress Need Further Information  I concur that the Interpersonal and Professional Communication Competency requirements for this Accomplishment: * Have been met for this Project Have NOT been met for this Project Project is still In Progress Project In Progress Project In Progress	requirements for this Accomplishment: *	Additional Information Needed: *
I concur that the Interpersonal and Professional Communication Competency requirements for this Accomplishment: *  Have been met for this Project Have NOT been met for this Project Project is still In Progress Need Further Information  I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *  Have been met for this Project Have NOT been met for this Project Project is still In Progress Project is still In Progress Project In Progress	Have NOT been met for this Project     Project is still In Progress	
<ul> <li>Have NOT been met for this Project</li> <li>Project is still In Progress</li> <li>Need Further Information</li> <li>I concur that the Foundations for Leadership Competency requirements for this Accomplishment: *</li> <li>Have been met for this Project</li> <li>Have NOT been met for this Project</li> <li>Project is still In Progress</li> <li>Overall Status</li> <li>I concur that the overall status of this Accomplishment is: *</li> <li>Project In Progress</li> </ul>	I concur that the Interpersonal and Professional Communication Competency	General Comments or Feedback:
Have been met for this Project Have NOT been met for this Project Project is still in Progress  I concur that the overall status of this Accomplishment is: * Project In Progress	Have NOT been met for this Project     Project is still In Progress	
Have NOT been met for this Project     Project is still In Progress     Project In Progress		Overall Status
	Have NOT been met for this Project     Project is still In Progress	Project In Progress

Table 8.3.2.a. Accomplishment Review Fields

Field Name	Values	EIS	LLS	EEP	SAF	PHIFP	PE	ELI	PHAP
What Competencies has the Fellow listed for this Accomplishment?	<ol> <li>Analytic / Assessment Skills</li> <li>Policy Assessment and Communication</li> <li>Interpersonal and Professional Communication</li> <li>Foundations for Leadership</li> </ol>	No	No	No	No	No	Yes	No	No
I concur that the Competency requirements for this Accomplishment:	Have been met for this Accomplishment     Have NOT been met for this Accomplishment     Accomplishment is still In Progress     Need Further Information	No	No	No	No	No	Yes	No	No
Missing Requirements:	•	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Additional Information Needed:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
General Comments or Feedback:	<u>-</u>	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
I concur that the overall status of this Accomplishment is:	Accomplishment in Progress     Completed and meets all the Competencies listed above	No	No	No	No	No	Yes	No	No

#### **8.4 PHAP**

#### 8.4.1 Semi-Annual Activity Reporting (SAAR)

#### 8.4.1.1 Section 1: Associate Activity

Figure 8.4.1.1.a. Section 1: Associate Activity Fields

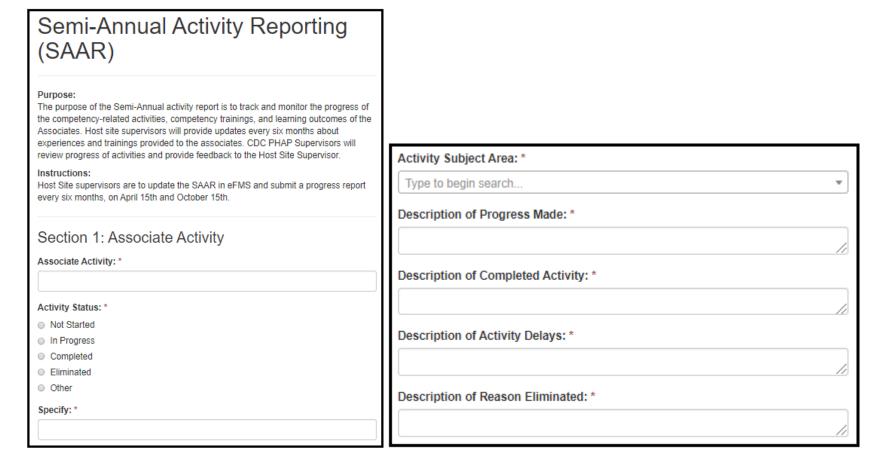


Table 8.4.1.1.a. Section 1: Associate Activity Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Associate Activity:	-	No	No	No	No	No	No	No	No	Yes
Activity Status:	1. Not Started	No	No	No	No	No	No	No	No	Yes
	2. In Progress									
	3. Completed									
	4. Eliminated									
	5. Other									
Specify:	-	No	No	No	No	No	No	No	No	Yes
Activity Subject Area:	Subject Area Lookup	No	No	No	No	No	No	No	No	Yes
Description of Progress Made:	-	No	No	No	No	No	No	No	No	Yes
Description of Completed Activity:	-	No	No	No	No	No	No	No	No	Yes
Description of Activity Delays:	-	No	No	No	No	No	No	No	No	Yes
Description of Reason Eliminated:	-	No	No	No	No	No	No	No	No	Yes

#### 8.4.1.2 Section 2: Competency Training

Figure 8.4.1.2.a. Section 2: Competency Training Fields

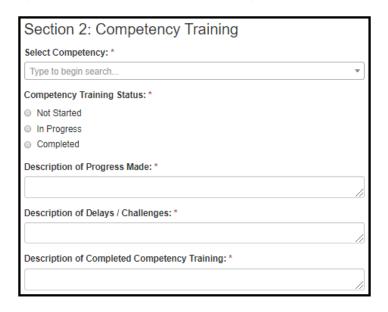


Table 8.4.1.2.a. Section 2: Competency Training Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Select Competency:	-	No	No	No	No	No	No	No	No	Yes
Competency Training Status:	1. Not Started 2. In Progress 3. Completed	No	No	No	No	No	No	No	No	Yes
Description of Progress Made:	-	No	No	No	No	No	No	No	No	Yes
Description of Delays / Challenges:	-	No	No	No	No	No	No	No	No	Yes
Description of Completed Competency Training:	-	No	No	No	No	No	No	No	No	Yes

### 8.4.1.3 Section 3: Learning Outcome

Figure 8.4.1.3.a. Section 3: Learning Outcome Fields

Section 3: Learning Outcome
Select Learning Outcome: *
Conduct data collection activities
<ul> <li>Deliver an oral presentation</li> <li>Develop a health communication or educational product</li> </ul>
Plan and lead a meeting
Identify a need and propose a solution
Produce a written report     Write and submit an abstract
Learning Outcome Completion Date: *

Table 8.4.1.3.a. Section 3: Learning Outcome Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Select Learning	1. Conduct data collection activities	No	No	No	No	No	No	No	No	Yes
Outcome:	Deliver an oral presentation     Develop a health communication or educational product     Han and lead a meeting									
	<ul><li>5. Identify a need and propose a solution</li><li>6. Produce a written report</li><li>7. Write and submit an abstract</li></ul>									
Learning Outcome Completion Date:	-	No	No	No	No	No	No	No	No	Yes

#### 8.4.1.4 Section 4: Priority Training Needs

Figure 8.4.1.4.a. Section 3: Learning Outcome Fields

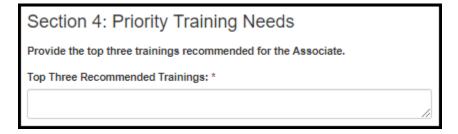


Table 8.4.1.4.a. Section 3: Learning Outcome Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Top Three Recommended Trainings:	-	No	No	No	No	No	No	No	No	Yes

#### 8.4.2 Project Review

Figure 8.4.2.a. Project Review Fields

#### PHAP Project Review 5.1 Treats others courteously and respectfully 5.2 Exercises initiative, persistence, tact, and resourcefulness in establishing and continuing work relationships What Competencies has the Associate listed for this Project? \* 5.3 Elicits and applies feedback to build professional skills and competencies 1.1 Monitors health risks and factors affecting the community 5.4 Makes decisions that are focused on desired results 1.2 Uses data that are valid and reliable for assessing the health of a community 1.3 Synthesizes public health information to accurately assess problems 5.5 Uses the chain of command to address risks, issues, or concerns ■ 1.4 Applies ethical principles in using (e.g., accessing, analyzing, using, 6.1 Communicates in writing and orally with linguistic and cultural proficiency to maintaining, and disseminating) public health data a target audience 1.5 Uses information technology in accessing, collecting, analyzing, using maintaining, and disseminating data and information 6.2 Communicates information that is clear, timely, accurate and uses plain 1.6 Defends decisions using logic as well as qualitative and quantitative data language 2.1 Applies knowledge of various approaches to improving population-based health 6.3 Conveys data and information to professionals and the public using a variety of 2.2 Describes the basic public health sciences (i.e., laboratory, epidemiology, approaches (e.g., reports, presentations, em surveillance, and informatics) 2.3 Describes how public health sciences are used in the delivery of the 10 6.4 Applies communication and group dynamic strategies in interactions with Essential Public Health services individuals and groups 2.4 Incorporates public health informatics practices and procedures 6.5 Demonstrates active listening skills 2.5 Defines the roles, responsibilities and contributions of various organizations and agencies to specific federal, state, trib 7.1 Incorporates strategies for interacting with people from diverse backgrounds 2.6 Describes public health as part of a larger inter-related system of organizations 7.2 Recognizes the ways in which diversity influences policies, program, and the that influence the health of populations a 3.1 Identifies information required in the program planning process overall health of a community 3.2 Gathers information for evaluating policies, programs, and services 7.3 Recognizes the benefit of using a diverse workforce to better serve target 3.3 Contributes to the implementation of an organizational strategic plan populations 3.4 Contributes to state/tribal/community health improvement planning 7.4 Uses cultural and social aspects to increase an intervention's effectiveness 4.1 Describes the public health laws and regulations governing public health 7.5 Develops and maintains relationships with diverse partners to improve 4.2 Adheres to laws, regulations, policies, and procedures for ethical public health population-based health 8.1 Establishes relationships to improve health in a community (e.g., partnerships, 4.3 Analyzes public health legislation, policy, and regulation issuances that impact academic, colleagues, customers, others) public health

Figure 8.4.2.b. Project Review Fields



I concur that the 1.1 Monitors health risks and factors affecting the community Competency requirements for this Project: \* Have been met for this Project Have NOT been met for this Project Project is still In Progress Need Further Information I concur that the 1.2 Uses data that are valid and reliable for assessing the health of a community Competency requirements for this Project: \* Have been met for this Project Have NOT been met for this Project Project is still In Progress Need Further Information I concur that the 1.3 Synthesizes public health information to accurately assess problems Competency requirements for this Project: \* Have been met for this Project Have NOT been met for this Project Project is still In Progress Need Further Information I concur that the 1.4 Applies ethical principles in using (e.g., accessing, analyzing, using, maintaining, and disseminating) public health data and information Competency requirements for this Project: \* Have been met for this Project Have NOT been met for this Project Project is still In Progress Need Further Information I concur that the 1.5 Uses information technology in accessing, collecting, analyzing, using maintaining, and disseminating data and information Competency requirements for this Project: \* Have been met for this Project

Have NOT been met for this Project

Project is still In Progress

#### Figure 8.4.2.c. Project Review Fields

I concur that the 1.6 Defends decisions using logic as well as qualitative and quantitative data Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.1 Applies knowledge of various approaches to improving population-based health Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.2 Describes the basic public health sciences (i.e., laboratory, epidemiology, surveillance, and informatics) Competency requirements for this Project:  $^{\star}$ 

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.3 Describes how public health sciences are used in the delivery of the 10 Essential Public Health services Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.4 Incorporates public health informatics practices and procedures Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.5 Defines the roles, responsibilities and contributions of various organizations and agencies to specific federal, state, tribal, local, and territorial public health programs Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.6 Describes public health as part of a larger inter-related system of organizations that influence the health of populations at local, national, and global levels Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.1 Identifies information required in the program planning process Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.2 Gathers information for evaluating policies, programs, and services Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.3 Contributes to the implementation of an organizational strategic plan Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

#### Figure 8.4.2.d. Project Review Fields

I concur that the 3.4 Contributes to state/tribal/community health improvement planning Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 4.1 Describes the public health laws and regulations governing public health programs Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- O Project is still In Progress
- Need Further Information

I concur that the 4.2 Adheres to laws, regulations, policies, and procedures for ethical public health practice Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 4.3 Analyzes public health legislation, policy, and regulation issuances that impact public health Competency requirements for this Project:

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 5.1 Treats others courteously and respectfully Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 5.2 Exercises initiative, persistence, tact, and resourcefulness in establishing and continuing work relationships Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 5.3 Elicits and applies feedback to build professional skills and competencies Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 5.4 Makes decisions that are focused on desired results Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 5.5 Uses the chain of command to address risks, issues, or concerns Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 6.1 Communicates in writing and orally with linguistic and cultural proficiency to target audience Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

#### Figure 8.4.2.d. Project Review Fields

I concur that the 6.2 Communicates information that is clear, timely, accurate and uses plain language Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 6.3 Conveys data and information to professionals and the public using a variety of approaches (e.g., reports, presentations, email, letters, press releases) Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 6.4 Applies communication and group dynamic strategies in interactions with individuals and groups Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 6.5 Demonstrates active listening skills Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 7.1 Incorporates strategies for interacting with people from diverse backgrounds Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 7.2 Recognizes the ways in which diversity influences policies, program, and the overall health of a community Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 7.3 Recognizes the benefit of using a diverse workforce to better serve target populations Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 7.4 Uses cultural and social aspects to increase an intervention's effectiveness Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 7.5 Develops and maintains relationships with diverse partners to improve population-based health Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

#### Figure 8.4.2.e. Project Review Fields

I concur that the 8.1 Establishes relationships to improve health in a community (e.g., partnerships, academic, colleagues, customers, others) Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 8.2 Collaborates with community partners to improve health in a community Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 8.3 Serves as a public health ambassador Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 8.4 Identifies policies, programs, and resources that improve health in a community (e.g., using evidence to demonstrate the need for a program, communicating the impact of a program) Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 9.1 Describes public health funding mechanisms Competency requirements for this Project:  $^{\star}$ 

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 9.2 Provides assistance on grants, cooperative agreements, contracts, and other awards Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 9.3 Describes components of a budget Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 9.4 Tracks program spending to current and forecasted budget constraints Competency requirements for this Project:  $^\star$ 

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

Figure 8.4.2.f. Project Review Fields

Missing Requirements: *
Additional Information Needed: *
//
General Comments or Feedback:
Overall Status
I concur that the overall status of this Project is: *
Project In Progress
Completed and meets all Competencies listed above

Table 8.4.2.a. Project Review Fields

Field Name	Values	EIS	LLS	EEP	SAF	PHIFP	PE	ELI	PHAP
What Competencies has the	1. 1.1 Monitors health risks and factors affecting the community	No	No	No	No	No	No	No	Yes
•	2. 1.2 Uses data that are valid and reliable for assessing the health of a community								
Associate listed for this Project?	3. 1.3 Synthesizes public health information to accurately assess problems								
	4. 1.4 Applies ethical principles in using (e.g., accessing, analyzing, using, maintaining, and disseminating)								
	public health data and information								
	5. 1.5 Uses information technology in accessing, collecting, analyzing, using maintaining, and disseminating								
	data and information								
	6. 1.6 Defends decisions using logic as well as qualitative and quantitative data     7. 2.1 Applies knowledge of various approaches to improving population-based health								
	8. 2.2 Describes the basic public health sciences (i.e., laboratory, epidemiology, surveillance, and informatics)								
	9. 2.3 Describes how public health sciences are used in the delivery of the 10 Essential Public Health services								
	10. 2.4 Incorporates public health informatics practices and procedures								
	11. 2.5 Defines the roles, responsibilities and contributions of various organizations and agencies to specific								
	federal, state, tribal, local, and territorial public health programs								
	12. 2.6 Describes public health as part of a larger inter-related system of organizations that influence the								
	health of populations at local, national, and global levels								
	13. 3.1 Identifies information required in the program planning process								
	14. 3.2 Gathers information for evaluating policies, programs, and services								
	15. 3.3 Contributes to the implementation of an organizational strategic plan								
	16. 3.4 Contributes to state/tribal/community health improvement planning								
	17. 4.1 Describes the public health laws and regulations governing public health programs								
	18. 4.2 Adheres to laws, regulations, policies, and procedures for ethical public health practice								
	19. 4.3 Analyzes public health legislation, policy, and regulation issuances that impact public health								
	20. 5.1 Treats others courteously and respectfully								
	21. 5.2 Exercises initiative, persistence, tact, and resourcefulness in establishing and continuing work								
	relationships 22. 5.3 Elicits and applies feedback to build professional skills and competencies								
	23. 5.4 Makes decisions that are focused on desired results								
	24. 5.5 Uses the chain of command to address risks, issues, or concerns								
	25. 6.1 Communicates in writing and orally with linguistic and cultural proficiency to target audience								
	26. 6.2 Communicates information that is clear, timely, accurate and uses plain language								
	27. 6.3 Conveys data and information to professionals and the public using a variety of approaches (e.g.,								
	reports, presentations, email, letters, press releases)								
	28. 6.4 Applies communication and group dynamic strategies in interactions with individuals and groups								
	29. 6.5 Demonstrates active listening skills								
	30. 7.1 Incorporates strategies for interacting with people from diverse backgrounds								
	31. 7.2 Recognizes the ways in which diversity influences policies, program, and the overall health of a								
	community								
	32. 7.3 Recognizes the benefit of using a diverse workforce to better serve target populations								
	33. 7.4 Uses cultural and social aspects to increase an intervention's effectiveness								
	34. 7.5 Develops and maintains relationships with diverse partners to improve population-based health								
	35. 8.1 Establishes relationships to improve health in a community (e.g., partnerships, academic, colleagues,								
	customers, others)								
	36. 8.2 Collaborates with community partners to improve health in a community 37. 8.3 Serves as a public health ambassador								
	38. 8.4 Identifies policies, programs, and resources that improve health in a community (e.g., using evidence to								
	demonstrate the need for a program, communicating the impact of a program)								
	39. 9.1 Describes public health funding mechanisms								
	40. 9.2 Provides assistance on grants, cooperative agreements, contracts, and other awards	1							
	41. 9.3 Describes components of a budget								
	42. 9.4 Tracks program spending to current and forecasted budget constraints								

Table 8.4.2.b. Project Review Fields

I concur that the Competency requirements for this Project:	1. Have been met for this Project 2. Have NOT been met for this Project 3. Project is still In Progress 4. Need Further Information	No	Yes						
Missing Requirements:	-	Yes							
Additional Information Needed:	-	Yes							
General Comments or Feedback:	-	Yes							
I concur that the overall status of this	1. Project in Progress	No	Yes						
Project is:	2. Completed and meets all the Competencies listed above								

#### 8.5 ELI

#### 8.5.1 Mentor Feedback Survey

#### 8.5.1.1 Introduction

Figure 8.5.1.1.a. Introduction Fields

# ELI Mentor Feedback Survey

### Introduction

Thank you for participating as a mentor in the CDC E-learning Institute Fellowship. We value your feedback to help us improve future cohorts. This anonymous survey should take an average of 5 minutes to complete. Please respond to this survey only once.

If you exit the survey before submitting it, you will not be able to return to edit your responses.

We look forward to your feedback.

Thank you!

CDC E-learning Institute Fellowship

### 8.5.1.2 Instructional Design Competencies and Program Design

Figure 8.5.1.2.a. Instructional Design Competencies and Program Design Fields

Instructional Design Competencies and Program	Design learning assessment *							
Design	Poor							
Please rate the degree to which the fellowship addressed each competency.	○ Fair							
Instructional Design (process and application) *								
O Poor	○ Good							
Fair	Excellent							
⊚ Good	Formative evaluation *	2. What is your opinion of the balance of written material, webinars, and						
Excellent	O Poor	interactivity in this fellowship? *						
Data collection and analysis *	○ Fair	Too much written materials and webinars, and not enough interactive learning						
Poor	○ Good	Right amount of written materials, webinars, and interactive learning						
Fair	<ul><li>Excellent</li></ul>	Too much interactive learning and not enough written materials and webinars						
Good								
Excellent	Summative evaluation *	3. Rate your level of agreement with the following statement about the design of						
Needs assessment *	O Poor	the fellowship. Content provided in the fellowship reflect current best practices in e-learning and development *						
Poor	<ul><li>Fair</li></ul>	Strongly Disagree						
Fair	○ Good	Disagree						
◎ Good	<ul><li>Excellent</li></ul>	O Agree						
Excellent	Project management *	Strongly Agree						
Design of instructional interventions *	, ,	Not Applicable / Don't Know						
Poor	O Poor							
Fair	○ Fair	4. How could the design of this fellowship be improved to make it a more effective learning experience? *						
© Good	○ Good	chocare learning experience:						
Excellent	<ul><li>Excellent</li></ul>							

Table 8.5.1.2.a. Instructional Design Competencies and Program Design Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Instructional Design (process and application)	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Data collection and analysis	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Needs assessment	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Design of instructional interventions	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Design learning assessment	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Formative evaluation	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Summative evaluation	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No
Project management	1. Poor 2. Fair 3. Good 4. Excellent	No	No	No	No	No	No	No	Yes	No

Table 8.5.1.2.b. Instructional Design Competencies and Program Design Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
2. What is your opinion of the balance of written material,	1. Too much written	No	No	No	No	No	No	No	Yes	No
webinars, and interactivity in this fellowship?	materials and webinars, and									
	not enough interactive									
	learning									
	2. Right amount of written									
	materials, webinars, and									
	interactive learning									
	3. Too much interactive									
	learning and not enough									
	written materials and									
	webinars									
3. Rate your level of agreement with the following	1. Strongly Disagree	No	No	No	No	No	No	No	Yes	No
statement about the design of the fellowship.	2. Disagree									
	3. Agree									
Content provided in the fellowship reflect current best	4. Strongly Agree									
practices in e-learning and development.	5. Not Applicable / Don't									
	know									
4. How could the design of this fellowship be improved to	-	No	No	No	No	No	No	No	Yes	No
make it a more effective learning experience?										

### 8.5.1.3 Your Mentoring Experience

Figure 8.5.1.3.a. Your Mentoring Experience Fields

Your Mentoring Experience	The time commitment required for mentoring matched my expectations. *
	Strongly Disagree
	○ Disagree
<ol><li>Rate your level of agreement with the following statements about your mentoring experience.</li></ol>	○ Agree
	Strongly Agree
My fellow and I were properly matched. *	Not Applicable
Strongly Disagree	
Disagree	Other mentors were available to assist me when I needed help. *
Agree	Strongly Disagree
Strongly Agree	○ Disagree
Not Applicable	○ Agree
My fellow developed the necessary skills to successfully complete the	Strongly Agree
fellowship.*	Not Applicable
Strongly Disagree	I would recommend becoming an ELI mentor to others. *
Disagree	Strongly Disagree
Agree	O Disagree
Strongly Agree	
Not Applicable	O Strength Agree
I felt adequately supported by the program administrator. *	Strongly Agree
Strongly Disagree	Not Applicable
Disagree	6. How many individuals (peers and fellows) have you developed and plan to
● Agree	maintain a professional relationship with beyond the fellowship? For what
Strongly Agree	purposes?*
Not Applicable	
Mentor orientation sufficiently prepared me to participate in the fellowship. *	7. How could the mentoring experience be improved to make it more effective? *
Strongly Disagree	
□ Disagree	
	8. Is there anything else you want to tell us? *
Strongly Agree	
Not Applicable	

Table 8.5.1.3.a. Your Mentoring Experience Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
My fellow and I were properly matched.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	No	No	No	No	No	No	No	Yes	No
My fellow developed the necessary skills to successfully complete the fellowship.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	No	No	No	No	No	No	No	Yes	No
I felt adequately supported by the program administrator.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	No	No	No	No	No	No	No	Yes	No
Mentor orientation sufficiently prepared me to participate in the fellowship.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	No	No	No	No	No	No	No	Yes	No
The time commitment required for mentoring matched my expectations.	1. Strongly Disagree 2. Disagree 3. Agree 4. Strongly Agree 5. Not Applicable	No	No	No	No	No	No	No	Yes	No

Table 8.5.1.3.b. Your Mentoring Experience Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Other mentors were available to assist me when I needed help.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	No	No	No	No	No	No	No	Yes	No
I would recommend becoming an ELI mentor to others.	<ol> <li>Strongly Disagree</li> <li>Disagree</li> <li>Agree</li> <li>Strongly Agree</li> <li>Not Applicable</li> </ol>	No	No	No	No	No	No	No	Yes	No
6. How many individuals (peers and fellows) have you developed and plan to maintain a professional relationship with beyond the fellowship? For what purposes?	-	No	No	No	No	No	No	No	Yes	No
7. How could the mentoring experience be improved to make it more effective?	-	No	No	No	No	No	No	No	Yes	No
8. Is there anything else you want to tell us?	-	No	No	No	No	No	No	No	Yes	No

#### 8.6 **EIS**

### 8.6.1 EIS Progress Assessment

Figure 8.6.1.a. EIS Progress Assessment Fields

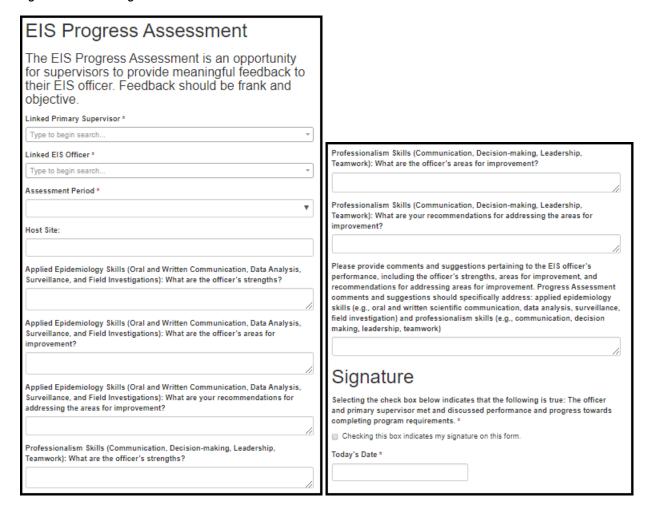


Table 8.6.1.a. EIS Progress Assessment Fields

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Primary Supervisor Name:	Supervisor Lookup	Yes	No	No	No	No	No	No	No	No
EIS Officer Name:	Officer Lookup	Yes	No	No	No	No	No	No	No	No
Assessment Period:	1. 6 Month	Yes	No	No	No	No	No	No	No	No
	2. 12 Month									
	3. 18 Month									
	4. 24 Month									
Host Site:	-	Yes	No	No	No	No	No	No	No	No
Applied Epidemiology Skills (Oral and	-	Yes	No	No	No	No	No	No	No	No
Written Communication, Data Analysis,										
Surveillance, and Field Investigations):										
What are the officer's strengths?										
Applied Epidemiology Skills (Oral and	-	Yes	No	No	No	No	No	No	No	No
Written Communication, Data Analysis,										l
Surveillance, and Field Investigations):										
What are the officer's areas for										
improvement?										
Applied Epidemiology Skills (Oral and	-	Yes	No	No	No	No	No	No	No	No
Written Communication, Data Analysis,										
Surveillance, and Field Investigations):										
What are your recommendations for										
addressing the areas for improvement?  Professionalism Skills (Communication,		Vaa	No	No	Na	Nie	No	Nia	No	No
Decision-making, Leadership,	-	Yes	NO	NO	No	No	INO	No	INO	NO
Teamwork): What are the officer's										
strengths?										
Professionalism Skills (Communication,	-	Yes	No	No	No	No	No	No	No	No
Decision-making, Leadership,		103	110	110	110	110	110	110	110	110
Teamwork): What are the officer's areas										
for improvement?										
·										
Professionalism Skills (Communication,	-	Yes	No	No	No	No	No	No	No	No
Decision-making, Leadership,										
Teamwork): What are your										
recommendations for addressing the										
areas for improvement?										

Field Name	Values	EIS	LLS	FLIGHT	EEP	SAF	PHIFP	PE	ELI	PHAP
Comments and Suggestions:	-	Yes	No	No	No	No	No	No	No	No
Signature:	1. Checking this box indicates my signature on this form.	Yes	No	No	No	No	No	No	No	No
Today's Date:		Yes	No	No	No	No	No	No	No	No

### 8.6.2 Activity Review

### Figure 8.6.2.a. Activity Review Fields

EIS Activity Review	I concur that the Long Presentation CAL requirements for this Activity: *
	Have been met for this Activity
What CAL(s) has the Officer listed for this activity? *  Field Investigation  Epi Analysis  Short Presentation	<ul> <li>Have NOT been met for this Activity</li> <li>Activity is still In Progress</li> <li>Need Further Information</li> </ul> I concur that the Service to the Agency CAL requirements for this Activity: *
Long Presentation     Service to the Agency	Have been met for this Activity     Have NOT been met for this Activity
Abstract     Manuscript     Lay Audience Presentation	Activity is still In Progress     Need Further Information
Public Health Update     Surveillance Evaluation	I concur that the Abstract CAL requirements for this Activity: *
I concur that the Field Investigation CAL requirements for this Activity: *  Have been met for this Activity  Have NOT been met for this Activity  Activity is still In Progress	Have NOT been met for this Activity     Activity is still In Progress     Need Further Information
Need Further Information	I concur that the Manuscript CAL requirements for this Activity: *
I concur that the Epi Analysis CAL requirements for this Activity: *  Have been met for this Activity  Have NOT been met for this Activity  Activity is still In Progress  Need Further Information  I concur that the Short Presentation CAL requirements for this Activity: *  Have been met for this Activity  Have NOT been met for this Activity	<ul> <li>Have NOT been met for this Activity</li> <li>Activity is still In Progress</li> <li>Need Further Information</li> <li>I concur that the Lay Audience Presentation CAL requirements for this Activity: *</li> <li>Have been met for this Activity</li> <li>Have NOT been met for this Activity</li> <li>Activity is still In Progress</li> </ul>
Activity is still In Progress     Need Further Information	Need Further Information

### Figure 8.6.2.b. Activity Review Fields

I concur that the Public Health Update CAL requirements for this Activity: *
Have been met for this Activity
Have NOT been met for this Activity
Activity is still In Progress
Need Further Information
I concur that the Surveillance Evaluation CAL requirements for this Activity: *
Have been met for this Activity
Have NOT been met for this Activity
Activity is still In Progress
Need Further Information
Additional Information Needed: *  General Comments or Feedback:
Overall Status
I concur that the overall status of this Activity is: *
Activity In Progress
Completed and meets all the CALs listed above

Table 8.6.2.a. Activity Review Fields

Field Name	Values	EIS	LLS	EEP	SAF	PHIFP	PE	ELI
What CALs has the Officer listed for this activity?	1. Field Investigation 2. Epi Analysis 3. Short Presentation 4. Long Presentation 5. Service to the Agency 6. Abstract 7. Manuscript 8. Lay Audience Presentation 9. Public Health Update 10. Surveillance Evaluation	Yes	No	No	No	No	No	No
I concur that the CAL requirements for this Activity:	Have been met for this Activity     Have NOT been met for this Activity     Activity is still In Progress     Need Further Information	Yes	No	No	No	No	No	No
Missing Requirements:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Additional Information Needed:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes
General Comments or Feedback:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes
I concur that the overall status of this Activity is:	Activity in Progress     Completed and meets all the CALs listed above	Yes	No	No	No	No	No	No

#### **8.7 PHIFP**

### 8.7.1 Project Review

Figure 8.7.1.a. Project Review Fields

### PHIFP Project Review

What Competencies has the Fellow listed for this project? \*

- 1.1 Formulate a public health informatics problem to enable design of effective solutions
- 1.2 Assess data, information, knowledge needs and resources to support decision making and problem solving
- 1.3 Apply the scientific method to PHI problem solving
- 2.1 Implement a communication plan to engage stakeholders
- 2.2 Synthesize information for dissemination to technical and non-technical audiences
- 2.3 Apply team management strategies, such as conflict resolution, active listening, and negotiation skills, with individuals an
- 2.4 Develop strategies for interacting with persons from diverse cultural, socioeconomic. educational, racial, ethnic, and profe
- 3.1 Apply software engineering models and methods to software development life cycle
- 3.2 Recommend solutions that assure confidentiality, security, and integrity while maximizing availability of information public
- 3.3 Formulate models for acquisition, representation, processing, display, or transmission of public health information
- 3.4 Apply information standards in developing public health information systems projects and interoperable public health informa
- 4.1 Develops a vision for system change
- 4.2 Demonstrates self-awareness and one's impact on others
- 4.3 Plan with community partners to solve an informatics problem

I concur that the 1.1 Formulate a public health informatics problem to enable design of effective solutions Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 1.2 Assess data, information, knowledge needs and resources to support decision making and problem solving Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 1.3 Apply the scientific method to PHI problem solving Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.1 Implement a communication plan to engage stakeholders Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.2 Synthesize information for dissemination to technical and non-technical audiences Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

#### Figure 8.7.1.b. Project Review Fields

I concur that the 2.3 Apply team management strategies, such as conflict resolution, active listening, and negotiation skills, with individuals and groups Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.4 Develop strategies for interacting with persons from diverse cultural, socioeconomic, educational, racial, ethnic, and professional backgrounds Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.1 Apply software engineering models and methods to software development life cycle Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.2 Recommend solutions that assure confidentiality, security, and integrity while maximizing availability of information public health Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 2.4 Develop strategies for interacting with persons from diverse cultural, socioeconomic, educational, racial, ethnic, and professional backgrounds Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.1 Apply software engineering models and methods to software development life cycle Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.2 Recommend solutions that assure confidentiality, security, and integrity while maximizing availability of information public health Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.3 Formulate models for acquisition, representation, processing, display, or transmission of public health information Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

I concur that the 3.4 Apply information standards in developing public health information systems projects and interoperable public health information systems Competency requirements for this Project: \*

- Have been met for this Project
- Have NOT been met for this Project
- Project is still In Progress
- Need Further Information

### Figure 8.7.1.c. Project Review Fields

I concur that the 3.4 Apply information standards in developing public health information systems projects and interoperable public health information systems Competency requirements for this Project: *	
Have been met for this Project	
Have NOT been met for this Project	
Project is still In Progress	
Need Further Information	
I concur that the 4.1 Develops a vision for system change Competency requirements for this Project: *	Missing Requirements: *
Have been met for this Project	
<ul> <li>Have NOT been met for this Project</li> </ul>	//
Project is still In Progress	Additional Information Needed: *
Need Further Information	
I concur that the 4.2 Demonstrates self-awareness and one's impact on others Competency requirements for this Project: *	General Comments or Feedback:
Have been met for this Project	
<ul> <li>Have NOT been met for this Project</li> </ul>	
Project is still In Progress	
Need Further Information	
I concur that the 4.3 Plan with community partners to solve an informatics problem Competency requirements for this Project: *	Overall Status
Have been met for this Project	I concur that the overall status of this Project is: *
<ul> <li>Have NOT been met for this Project</li> </ul>	Project In Progress
Project is still In Progress	meets all Competencies listed above
Need Further Information	Theets all Competencies listed above
	<u> </u>

Table 8.7.1.a. Project Review Fields

Field Name	Values	EIS	LLS	EEP	SAF	PHIFP	PE	ELI	PHAP
What Competencies has the Fellow listed for this project?	1. 1.1 Formulate a public health informatics problem to enable design of effective solutions 2. 1.2 Assess data, information, knowledge needs and resources to support decision making and problem solving 3. 1.3 Apply the scientific method to PHI problem solving 4. 2.1 Implement a communication plan to engage stakeholders 5. 2.2 Synthesize information for dissemination to technical and non-technical audiences 6. 2.3 Apply team management strategies, such as conflict resolution, active listening, and negotiation skills, with individuals and groups 7. 2.4 Develop strategies for interacting with persons from diverse cultural, socioeconomic, educational, racial, ethnic, and professional backgrounds 8. 3.1 Apply software engineering models and methods to software development life cycle  9. 3.2 Recommend solutions that assure confidentiality, security, and integrity while maximizing availability of information public health 10. 3.3 Formulate models for acquisition, representation, processing, display, or transmission of public health information 11. 3.4 Apply information standards in developing public health information systems projects and interoperable public health information systems 12. 4.1 Develops a vision for system change 13. 4.2 Demonstrates self-awareness and one's impact on others 14. 4.3 Plan with community partners to solve an informatics problem	No	No	No	No	Yes	No	No	No
I concur that the Competency requirements for this Project:	<ol> <li>Have been met for this Project</li> <li>Have NOT been met for this Project</li> <li>Activity is still In Progress</li> <li>Need Further Information</li> </ol>	No	No	No	No	Yes	No	No	No
Missing Requirements:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Additional Information Needed:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
General Comments or Feedback:	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
I concur that the overall status of this Project is:	Project in Progress     Completed and meets all the Competencies listed above	No	No	No	No	Yes	No	No	No

# 9. Appendix

## I. Field Value Tables

### **Appendix of Field Value Tables**

Field Name	Application	Values	Values	Values	Values
	Locations	1	2	3	4
Approved Country List	6.2 Citizenship Status	United States Anguilla Antigua Australia Bahamas Barbados Barbuda Belize Bermuda British Virgin Islands Canada Dominica Grand Cayman Islands	Grenada Guyana Irish Republic Jamaica Montserrat New Zealand Saint Kitts and Nevis St. Lucia St. Vincent & the Grenadine Tabago Trinidad Turks and Caicos Islands United Kingdom		

# II. Lookup Tables

### **Appendix of Lookup Tables**

Lookup Table Name	Application	Values	Values	Values	Values	Values
	Locations	1		3		5
		1	2	3	4	5
Fellowship Lookup	3. eFMS System Help Desk Ticket	CDC E-learning Institute Fellowship Program (ELI) CDC Steven M. Teutsch Prevention Effectiveness (PE) Fellowship Epidemic Intelligence Service (EIS) Epidemiclogy Elective Program (EEP) Future Leaders in Infections and Global Health Threats (FLIGHT) Laboratory Leadership Service (LLS) Population Health Training in Place Program (PH-TIPP) Population Health Workforce Initiative (PHWI) Preventive Medicine Residency and Fellowship (PMR/F) Public Health Associate Program (PHAP) Public Health Informatics Fellowship Program (PHIFP) Science Ambassador Fellowship (SAF)				
State/Territory Lookup	6.2.1 Conference Presentation 6.4.3 Success Story 7.1.2 Student Exit Survey	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Washington, DC Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota	Newada New Hampshire New Jersey New Mexico New York North Carolina North Dakota Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin Wyoming Puerto Rico			

		Mississippi Missouri Montana Nebraska	Pacific Islands U.S. Virgin Islands Guam Northern Mariana Islands			
Center/Division/Branch Lookup	7.1.2 Student Exit Survey	NIOSH / Office of the Director / Administrative Svcs Branch (Cincinnati) NIOSH / Office of the Director / Administrative Svcs Branch (Morgantown) NIOSH / Office of the Director / Administrative Svcs Branch (Morgantown) NIOSH / Office of the Director / Administrative Svcs Branch (Spokane) NIOSH / Office of the Director / Administrative Svrcs Branch (Pittsburgh) NCHS / Office of Analysis & Epidemiology / Aging & Chronic Disease Statistics Branch NIOSH / Health Effects Laboratory Division / Allergy & Clinical Immunology Branch NCHS / Division of Health Care Statistics / Ambulatory and Hospital Care Statistics Branch NIOSH / Division of Safety Research / Analysis & Field Branch NCHS / Division of Health & Nutrition Examination Surveys / Analysis Branch NCEZIID / Division of Scientific Resources / Animal Resources Branch NCCDPHP / Division of Fopulation Branch NCCDPHP / Division of Population Health / Applied Research and Translation Branch NCCDPHP / Division of Reproductive Health / Applied Science and Evaluation Branch NCCDPHP / Division of Reproductive Health / Applied Sciences Branch NCCDPHP / Division of Reproductive Health / Applied Sciences Branch NCCDPHP / Division of Scientific Reproductive Health / Applied Sciences Branch NCCDPHP / Division of Sciences Branch NCEZID / Division	NCHS / Division of Health Interview Statistics / Data Analysis & Quality Assurance Branch CSELS / Division of Scientific Education and Professional Development / Education and Training Se NCHHSTP / Division of Tuberculosis Elimination / Data Management and Statistics Branch NIOSH / Pittsburgh Mining Research Division / Electrical & Mechanical Systems Safety Branch NCHS / Division of Health Interview Statistics / Data Production & Systems Branch CPR / Division of Emergency Operations / Emergency and Risk Communications Branch NCEZID / Division of Vector-Borne Diseases / Dengue Branch NCEZID / Division of Congenital Health Science and Practice / Emergency Management, Radiation, a NCBDDD / Division of Congenital and Developmental Disabilities Branch NCEZID / Division of Preparedness and Emerging Infections / Emergency Preparedness and Response B NCBDDD / Division of Human Development and Disability of Preparedness and Response B NCBDDD / Division of Human Development and Disability / Disability and Health Branch CCH / Division of Global Health Protection / Emergency Response and Recovery Branch	NIOSH / Pittsburgh Mining Research Division / Fires and Explosions Branch NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Food Safety Office NCEZID / Division of Global Migration and Quarantine / Geographic Medicine and Health Promotion B NCHS / Office of Analysis & Epidemiology / Health Promotion Statistics Branch ATSDR / Division of Toxicology and Human Health Sciences / Geospatial Research, Analysis, and Ser CGH / Division of Global Health Protection / Global Non-communicable Disease Branch NCCDPHP / Office on Smoking and Health / Global Tobacco Control Branch NCHHSTP / Division of Sexually Transmitted Disease Prevention / Health Services Research and Eval CGH / Division of Global HIV and TB / Global Tuberculosis Branch NCIPC / Division of Global HIV and TB / Global Tuberculosis Branch NICPC / Division of Ground Control Branch NICSH / Pittsburgh Mining Research Division of Ground Control Branch NCEH / Division of Emergency and Environmental Health Services / Healthy Community Design Initiative NIOSH / Division of Surveillance, Hazard Evaluations & Techn NCEH / Division of Emergency Hazard Evaluations & Techn	Research and Evaluation Branch NCEH / Division of Laboratory Science / Inorganic and radiation analytical toxicology branch CSELS / Division of Laboratory Systems / Laboratory Training and Services Branch NCEH / Division of Environmental Health Science and Practice / Lead Poisoning Prevention and Envi CSELS / Division of Public Health Information and Dissemination / Library Science Branch CPR / Division of Strategic National Stockpile / Logistics Branch CPR / Division of Emergency Operations / Logistics Support Branch NCHS / Division of Health Care Statistics / Long-Term Care Statistics / Long-Term Care Statistics Sranch CGH / Division of Global HIV and TB / Management and Operations Branch NIOSH / Office of the Director / Management Systems Branch NCCDPHP / Division of Reproductive Health / Maternal and Child Health Branch NCCDPHP / Division of Reproductive Health / Maternal and Infant Health Branch NCIBO / Division of Bacterial Branch / Meningitis and Vaccine Preventable Diseases Branch CGH / Division of Global HIV and TB / Moningitis and Vaccine Preventable Diseases Branch CGH / Division of Global HIV and TB / Moningitis and Vaccine Preventable Diseases Branch CGH / Division of Global HIV and TB / Moningitis and Vaccine Preventable Diseases Branch CGH / Division of Global HIV and TB / Monitoring.	CPR / Division of Select Agents and Toxins / Operations Branch NCEZID / Office of the Director / Office of the Director / Office of the Director / Office of Lebricatory Science / Organic analytical toxicology branch NCHS / Office of the Director / Office of Selectory NIOSH / Division of Applied Research & Technology / Organizational Science & Human Factors Branch NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Outbreak Response and Pre CGH / Division of Global Health Protection / Overseas Business Operations Branch CGH / Division of Global HIV and TB / Overseas Strategy and Management Branch CGH / Division of Parasitic Diseases and Malaria / Parasitic Diseases Branch CSELS / Division of Health Informatics and Surveillance Systems / Partnerships and Evaluation Branch NIOSH / Health Effects Laboratory Division / Pathology & Physical Activity, & Obesity / Physical Activity and Health Branch CCPR / Division of Strategic National Stockpile / Planning and Analysis Branch NCHS / Division of Health & Nutrition Examination Surveys / Planning Branch CPR / Division of Emergency
		Branch NCEZID / Division of Preparedness and Emerging Infections / Arctic Investigations Program NCCDPHP / Division of Population Health / Arthritis, Epilepsy and	NIOSH / Division of Compensation Analysis & Support / Division of Compensation Analysis & Support NCEH / Division of Laboratory Science /	and Environmental Health Services / Healthy Homes and Lead Poisoning NIOSH / Health Effects Laboratory Division / Health Communication Research Branch	Evaluation, and Data Analysis Branch NIOSH / Office of the Director / Office of Extramural Coordination & Special Projects NCHS / Division of Vital	Operations / Plans, Training, Exercise and Evaluation Branch NCIPC / Division of Violence Prevention / Prevention Practice and Translation Branch
		Well-Being Branch NCIRD / Immunization Services	Emergency response branch NCCDPHP / Division of Oral	NCBDDD / Division of Blood Disorders / Hemostasis	Statistics / Mortality Statistics Branch	NCBDDD / Office of the Director / Policy, Planning,

Division / Assessment Branch NCFH / Division of Environmental Health Science and Practice / Asthma and Community Health Branch NCEZID / Division of Vector-Borne Diseases / Bacterial Diseases Branch NCEZID / Division of High Consequence Pathogens & Pathology / Bacterial Special Pathogens Branch NCHHSTP / Division of HIV/AIDS Prevention Surveillance & Epidemiology / Behavioral And Clinical S... NIOSH / Division of Applied Research & Technology / Biomonitoring & Health Assessment Branch NIOSH / Health Effects Laboratory Division / Biostatistics & Epidemiology Branch NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Biostatistics and Informa NCEZID / Division of Scientific Resources / Biotechnology Core Facility Branch NCBDDD / Division of Congenital and Developmental Disorders / Birth Defects Branch NCHS / Office of Management & Operations / Building Operations & Services Staff NCHS / Office of Management & Operations / Business Logistics Staff NCCDPHP / Division of Cancer Prevention and Control / Cancer Surveillance Branch NCHHSTP / Division of HIV/AIDS Prevention-Intervention & Support / Capacity Building Branch CPR / Division of State and Local Readiness / Capacity Building Branch ATSDR / Division of Community Health Investigations / Central Branch NIOSH / Division of Applied Research & Technology / Chemical Exposure & Monitoring NCBDDD / Division of Human Development and Disability / Child Development and Disability Branch NCEZID / Division of High Consequence Pathogens & Pathology / Chronic Viral Diseases

Health / Division of Oral Laboratory Branch Health NCCDPHP / Office of the ATSDR / Division of Director / Health Toxicology and Human Communication Science Health Sciences / Emergency Office Response Program NCHHSTP / Office of the NIOSH / Health Effects Director / Health Laboratory Division / Communication Science Engineering & Control Office CGH / Division of Global HIV Branch NIOSH / Division of Applied and TB / HIV Care and Research & Technology / Treatment Branch Engineering & Physical NCBDDD / Office of the Hazards Branch Director / Health NCFZID / Division of Communication Science Foodborne, Waterborne and Office Environmental Diseases / NCHHSTP / Division of Enteric Diseases Epidemio... HIV/AIDS Prevention NCEZID / Division of Surveillance & Epidemiology / HIV Incidence and Case Su... Foodborne, Waterborne and Environmental Diseases / NIOSH / Pittsburgh Mining Enteric Diseases Laborato Research Division / Health CGH / Division of Parasitic Communication, Surveillance, Diseases and Malaria / Research Suppor... **Entomology Branch** CGH / Division of Global HIV ATSDR / Division of and TB / HIV Prevention Toxicology and Human Branch Health Sciences / NCCDPHP / Office on Environmental Epidemiology Smoking and Health / Health Branch Communications Branch NCCDPHP / Division of NCIPC / Division of Population Health / Unintentional Injury Epidemiology and Prevention / Home. Surveillance Branch Recreation, and NCFH / Division of Transportation Branch Emergency and CGH / Division of Global HIV and TR / Health Informatics **Environmental Health** Services / Environmental Data Management, and Health Services Br... Statistics Branch ATSDR / Division of NIOSH / Pittsburgh Mining Toxicology and Human Research Division / Human Health Sciences / **Factors Branch** Environmental Health NCEZID / Division of Global Surveillance Branch Migration and Quarantine / NCHHSTP / Division of Viral Immigrant, Refugee, and Hepatitis / Epidemiology and Migrant Health Branch Surveillance Branch NCIRD / Immunization ATSDR / Division of Services Division / Toxicology and Human Immunization Information Health Sciences / System Support Branch Environmental Medicine NCEZID / Division of Branch Healthcare Quality Promotion NCHHSTP / Division of / Immunization Safety Office HIV/AIDS Prevention CGH / Global Immunization Surveillance & Division / Immunization Epidemiology / Epidemiology System Branch Branch NCIRD / Influenza Division / NCEH / Division of Immunology and Emergency and Pathogenesis Branch Environmental Health NIOSH / Division of Services / Environmental Surveillance, Hazard

Public Health Read.

NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Mycotic Diseases Branch NCFH / Office of the Director / Office of Financial, Administrative and Information Services NCEH / Division of Laboratory Science / Newborn screening and molecular biology branch NCIRD / Office of the Director / Office of Health Communication Science NCCDPHP / Division of Nutrition, Physical Activity, & Obesity / Nutrition Branch NCHHSTP / Office of the Director / Office of Health Fauity NCEH / Division of Laboratory Science / Nutritional biomarkers branch NCIRD / Office of the Director / Office of Informatics NCCDPHP / Division of Nutrition, Physical Activity, & Obesity / Obesity Prevention and Control Br.. NCIRD / Office of the Director / Office of Laboratory Science NIOSH / Office of the Director / Office of Administrative & Management Svcs NCIRD / Office of the Director / Office of Management and Operations NCEH / Office of the Director / Office of Communication NCHHSTP / Office of the Director / Office of Management and Program Support NCIPC / Office of the Director / Office of Communication NCHS / Office of Planning Budget and Legislation / Office of Planning Budget and Legislation NCIRD / Office of the Director / Office of Policy NCIPC / Office of the Director / Office of Policy and Partnerships NCEH / Office of the Director / Office of Policy. Planning, and Evaluation NCIPC / Office of the Director / Office of Program Evaluations & Field Studies / Management and Operations

and Evaluation Team NCHHSTP / Division of HIV/AIDS Prevention-Intervention & Support / Prevention Program Branch NCIRD / Division of Viral Diseases / Polio and Picornavirus Laboratory Branch NCBDDD / Division of Congenital and Developmental Disorders / Prevention Research and Translation... CGH / Global Immunization Division / Polio Eradication NCCDPHP / Division of Population Health / Population Health Surveillance Branch NCHHSTP / Division of HIV/AIDS Prevention-Intervention & Support / Prevention Research Branch CSFLS / Division of Scientific **Education and Professional** Development / Population Health Workfor... NCEZID / Division of High Consequence Pathogens & Pathology / Prion & Public Health Office NCEZID / Division of High Consequence Pathogens & Pathology / Poxvirus and Rabies Branch NCHHSTP / Office of the Director / Program and Performance Improvement Office NCIPC / Division of Analysis, Research, and Practice Integration / Practice Integration and Evalu... CGH / Division of Global HIV and TB / Program Budget and Extramural Management Branch NCEZID / Division of Healthcare Quality Promotion / Prevention & Response Branch NCCDPHP / Division of Nutrition, Physical Activity, & Obesity / Program Development and Evaluatio... NCHHSTP / Division of Viral Hepatitis / Prevention Branch NCCDPHP / Division for Heart Disease and Stroke Prevention / Program **Development and Services** 

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Subject Area Lookup	8.4.1 Semi-Annual Activity Reporting (SAAR)	Adolescent & School Health (non-STI) Community Health Improvement Planning (CHIP)/Community Health Assessments (CHA) Chronic Disease Emergency/Disaster Preparedness and Response Environmental Health Genomics Health Equity/Access to Care Health Department Improvement/Accreditation Immunizations/Vaccine Preventable Disease Investigation Sexually Transmitted Disease Prevention Tuberculosis Prevention HIV Prevention Viral Hepatitis Prevention Adolescent/school-based Sexually Transmitted Disease prevention Other Infectious Disease Injury Prevention Maternal & Infant Health Public Health Policy & Law Public Health Surveillance Oral Health		