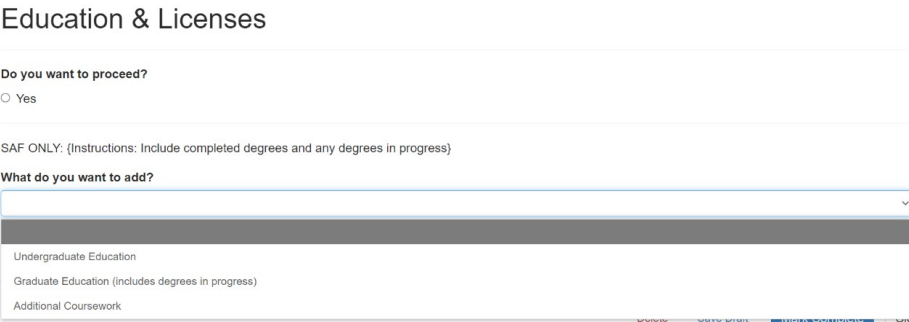
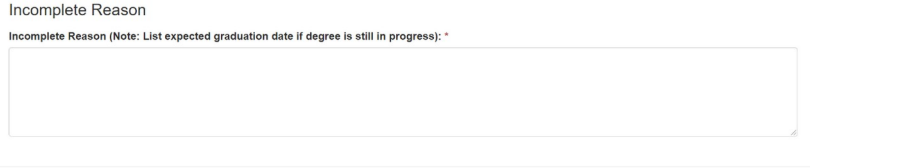


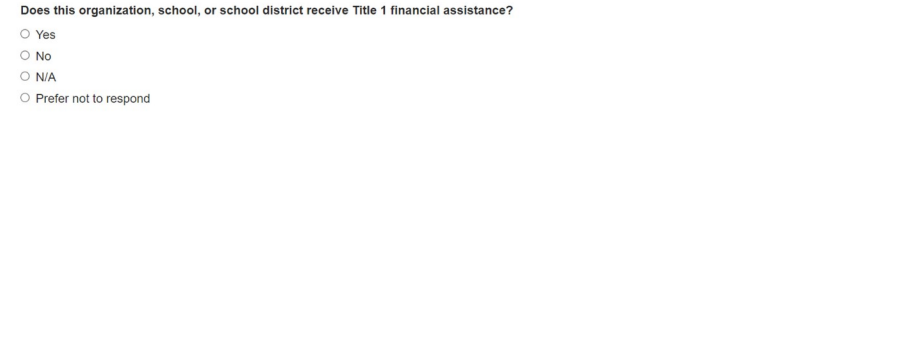
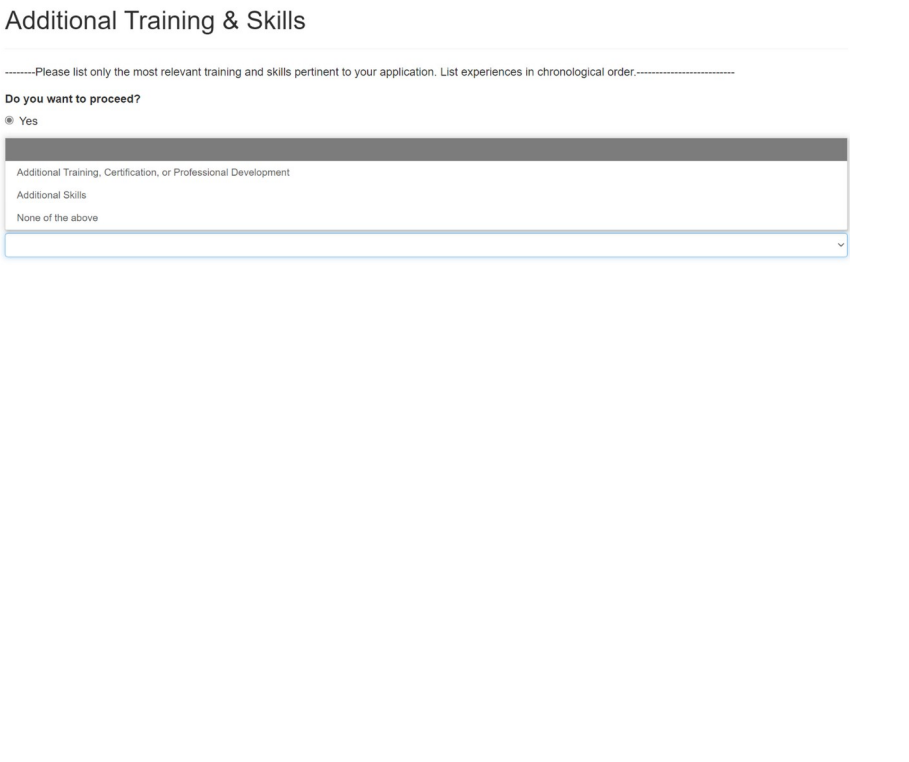
OMB Control Number 0920-0765 Fellowship Management System Change Request

Attachment 1 - Application Module Screenshots

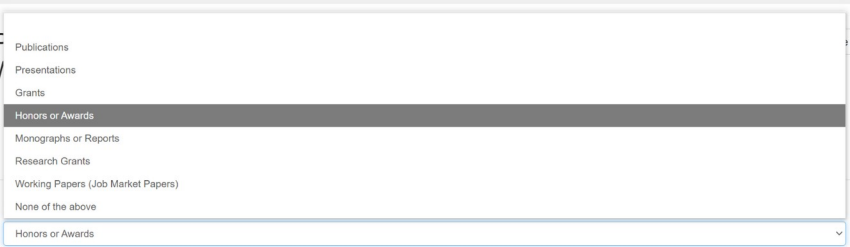
Program	Section	Requested Change	Screenshot
All	13.2-a	Change Type: Question revision	<p>Which of the following most influenced you to apply to this fellowship?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Handshake (e.g., job posting, fellow/alumni ambassador) <input type="checkbox"/> Other job search platform (e.g., Indeed, ZipRecruiter, Job Openings for Economists) <input type="checkbox"/> In-person event (e.g., conference booth) <input type="checkbox"/> News advertising (e.g., online ad, news media) <input type="checkbox"/> Newsletter or email listserv (e.g., from CDC, your university, professional organization) <input type="checkbox"/> Social Media (e.g., Facebook, LinkedIn, Instagram, Twitter, YouTube) <input type="checkbox"/> Webinar or other virtual event (e.g., information session, alumni panel) <input type="checkbox"/> Word of mouth (e.g., from current or former fellow, professor, supervisor) <input type="checkbox"/> Other (please specify)
	13.2-a	Change type: Question deletion	<div style="border: 1px solid gray; padding: 5px;"> <p>How did you connect with the person who told you about the fellowship by word of mouth? (Select all that apply) *</p> <ul style="list-style-type: none"> <input type="radio"/> Handshake (e.g., webinar, email, fellowship ambassador) <input type="radio"/> University event, webinar, presentation <input type="radio"/> CDC event, webinar, presentation, booth <input type="radio"/> Other event, webinar, presentation (specify) <input type="radio"/> Professional or academic setting (e.g., professor, mentor/supervisor, colleague) <input type="radio"/> Other (specify) <div style="border: 1px solid black; display: inline-block; padding: 5px; margin-top: 10px;">Delete Question</div> </div>
	13.2-a	Change type: Question deletion	<div style="border: 1px solid gray; padding: 5px;"> <p>On what job search platform did you find out about the fellowships? *</p> <ul style="list-style-type: none"> <input type="radio"/> Handshake <input type="radio"/> Indeed <input type="radio"/> JOE (Job Openings for Economists) <input type="radio"/> USAJobs <input type="radio"/> INFORMS <input type="radio"/> Other (specify) <div style="border: 1px solid black; display: inline-block; padding: 5px; margin-top: 10px;">Delete Question</div> </div>

Program	Section	Requested Change	Screenshot
SAF	6.6	<p>Change type: Question addition</p> <p>In the past 5 years, in which ways have you interacted with the Science Ambassador program?</p> <p>Options [SELECT ALL THAT APPLY]:</p> <ol style="list-style-type: none"> 1. Attended a CDC Science Ambassador regional training workshop 2. Previously applied to the CDC Science Ambassador Fellowship 3. Used CDC NERD Academy curriculum in my classroom 4. Used CDC Science Ambassador lesson plans in my classroom 5. None of the above 6. Other 	<p>In the past 5 years, in which ways have you interacted with the Science Ambassador program? (SELECT ALL THAT APPLY)</p> <p><input type="checkbox"/> Attended a CDC Science Ambassador regional training workshop</p> <p><input type="checkbox"/> Previously applied to the CDC Science Ambassador Fellowship</p> <p><input type="checkbox"/> Used CDC NERD Academy curriculum in my classroom</p> <p><input type="checkbox"/> Used CDC Science Ambassador lesson plans in my classroom</p> <p><input type="checkbox"/> None of the above</p> <p><input type="checkbox"/> Other</p>
SAF	6.6	<p>Change type: Question deletion</p> <p>Do you have a current teaching license in your state?</p>	<p><i>N/A - This field will be hidden for the SAF Fellow Application.</i></p>

Program	Section	Requested Change	Screenshot
SAF	7.2-a	<p>Change type: Question deletion</p> <p>4. Active U.S. License (due to limitation of eFMS, a new question must be added for SAF): {Instructions: Include completed degrees and any degrees in progress} Do you want to add?</p> <ol style="list-style-type: none"> 1. Undergraduate Education 2. Graduate Education (includes degrees in progress) 3. Additional Coursework 	
All	7.2-a	<p>Change Type: Response option revision</p> <p>2. Graduate Education to 2. Graduate Education (including degrees in progress)</p>	
SAF	7.9-a	<p>Change type: Question deletion</p> <p>Remove for SAF</p>	<p><i>N/A - These fields will be hidden for the SAF Fellow Application.</i></p>
All	7.11-a	<p>Change Type: Question revision</p> <p>Incomplete Reason (Note: List expected graduation date if degree is still in progress):</p>	

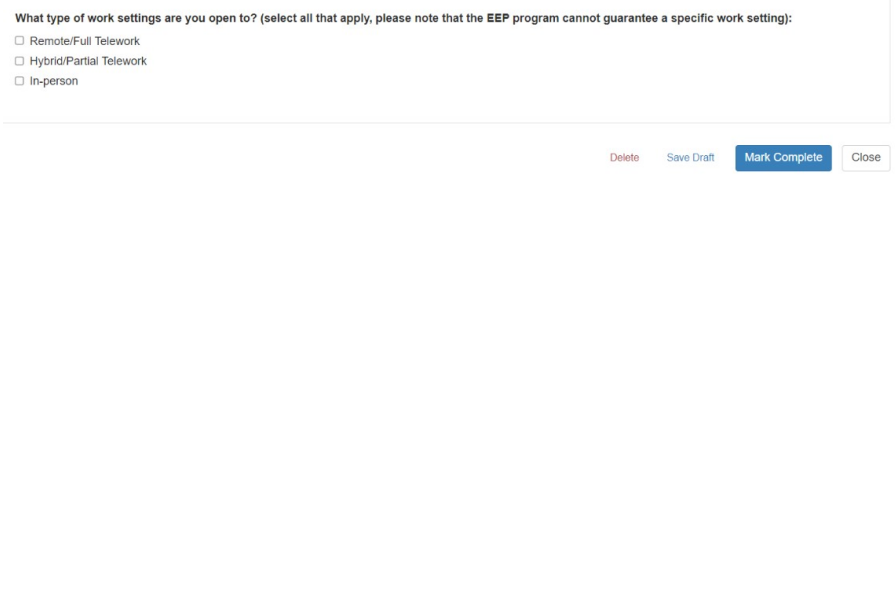
Program	Section	Requested Change	Screenshot
1q11SAF	8.3-a	<p>Change Type: Question revision</p> <p>Does this organization, school, or school district receive Title 1 financial assistance?</p>	
SAF	8.3-a	<p>Change Type: Response option revision</p> <p>Add additional answer option: 4. Prefer not to respond</p>	
SAF	9.2-a	<p>Change Type: Response option revision/question addition</p> <p>Remove:</p> <ol style="list-style-type: none"> 1. Clinical Training 2. U.S. Board Certification 4. Language Skill <p>Due to limitations of eFMS, a new question must be created for SAF:</p> <p>What do you need to add?</p> <ol style="list-style-type: none"> 1. Additional Training, Certification or Professional Development 2. None of the Above 	
EEP	9.2-a	<p>Change Type: Response option revision/question addition</p>	

Program	Section	Requested Change	Screenshot
		<p>Add response:</p> <ol style="list-style-type: none"> 1. Additional Skills <p>Due to limitations of eFMS, a new question must be created for SAF:</p> <p>What do you need to add?</p> <ol style="list-style-type: none"> 1. Additional Training, Certification or Professional Development 2. Additional Skills 3. None of the Above 	
EEP	New section if possible: 9.9	<p>Change type: Question addition</p> <p>Please select the statistical software package(s) for which you have Proficient/Skilled or Mastery/Expert competency [SELECT ALL THAT APPLY]:</p> <p>Entry/Novice</p> <ul style="list-style-type: none"> - Limited capabilities - Little or no experience <p>Proficient/Skilled</p> <ul style="list-style-type: none"> - Basic capabilities - Moderate amount of experience <p>Mastery/Expert</p> <ul style="list-style-type: none"> - Advanced capabilities - Extensive experience 	<p>EEP ONLY: Computer and Statistical Software Skills: Please select the statistical software package(s) for which you have Proficient/Skilled or Mastery/Expert competency [SELECT ALL THAT APPLY]:</p> <p>SAS <input type="text"/></p> <p>STATA <input type="text"/></p> <p>Epi-Info <input type="text"/></p> <p>R <input type="text"/></p> <p>Excel <input type="text"/></p> <p>Other (specify and provide rating) <input type="text"/></p>

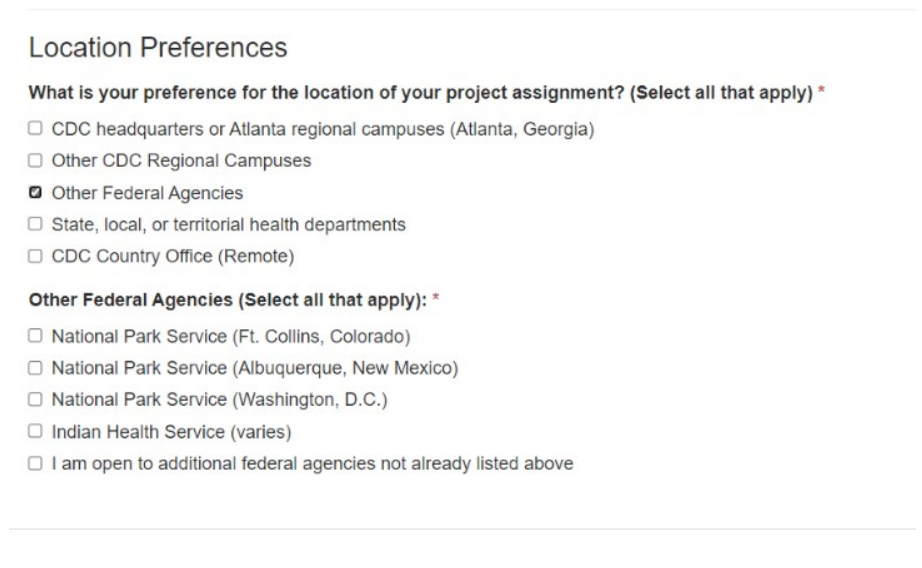
Program	Section	Requested Change	Screenshot
		<ol style="list-style-type: none"> 1. SAS 2. STATA 3. Epi-Info 4. R 5. Excel 6. Other: [Open-ended] 	
All applicable programs	10.2-a	Change Type: Question revision 4. Honor or Awards to 4. Honors or Awards	 <p>The screenshot shows a dropdown menu with the following options: Publications, Presentations, Grants, Honors or Awards (highlighted), Monographs or Reports, Research Grants, Working Papers (Job Market Papers), and None of the above. The selected option 'Honors or Awards' is also visible in a separate box below the menu.</p>
EEP	11.1-a	Change type: Question deletion	N/A – This field will be hidden for the EEP Fellow Application.

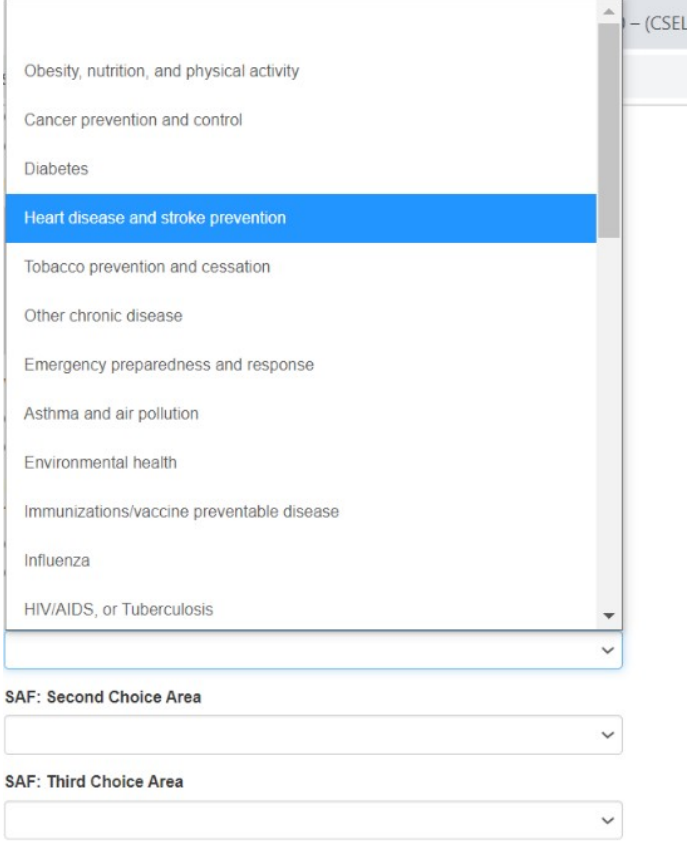
Program	Section	Requested Change	Screenshot
EEP	13.3.2-a	<p>Change Type: Response option revision</p> <p>Topic area(s): [SELECT ALL THAT APPLY]</p> <p>Note: added options are 13, 18, 27, 28, 29, 33, 34</p> <ol style="list-style-type: none"> 1. Obesity, nutrition, and physical activity 2. Cancer prevention and control 3. Diabetes 4. Heart disease and stroke prevention 5. Tobacco prevention and cessation 6. Other chronic disease 7. Emergency preparedness and response 8. Asthma and air pollution 9. Environmental health 10. Immunizations/vaccine preventable disease 11. Influenza 12. HIV/AIDS, or Tuberculosis 13. STD prevention 14. Viral hepatitis 15. Foodborne diseases 16. Waterborne diseases 17. Vectorborne diseases 18. Fungal Diseases 19. One Health and zoonotic disease 20. Arctic Investigations (Alaska) 21. Healthcare-associated infections 22. Quarantine and border health 	<p>Topic Area(s): SELECT ALL THAT APPLY.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Obesity, nutrition, and physical activity <input type="checkbox"/> Cancer prevention and control <input type="checkbox"/> Diabetes <input type="checkbox"/> Heart disease and stroke prevention <input type="checkbox"/> Tobacco prevention and cessation <input type="checkbox"/> Other chronic disease <input type="checkbox"/> Emergency preparedness and response <input type="checkbox"/> Asthma and air pollution <input type="checkbox"/> Environmental health <input type="checkbox"/> Immunizations/vaccine preventable disease <input type="checkbox"/> Influenza <input type="checkbox"/> HIV/AIDS or Tuberculosis <input type="checkbox"/> STD Prevention <input type="checkbox"/> Viral hepatitis <input type="checkbox"/> Foodborne Disease <input type="checkbox"/> Waterborne diseases <input type="checkbox"/> Vectorborne disease <input type="checkbox"/> Fungal Prevention <input type="checkbox"/> One Health and zoonotic disease <input type="checkbox"/> Arctic Investigations (Alaska) <input type="checkbox"/> Healthcare-associated infections <input type="checkbox"/> Quarantine and border health services <input type="checkbox"/> Unintentional injury <input type="checkbox"/> Opioid/prescription drug overdose prevention <input type="checkbox"/> Occupational health and safety <input type="checkbox"/> Violence Prevention <input type="checkbox"/> Reproductive Health <input type="checkbox"/> Maternal and infant health <input type="checkbox"/> Blood Disorders <input type="checkbox"/> Health statistics <input type="checkbox"/> State, local, and territorial health <input type="checkbox"/> Global health <input type="checkbox"/> COVID-19 <input type="checkbox"/> Other

Program	Section	Requested Change	Screenshot
		services 23. Unintentional injury 24. Opioid/prescription drug overdose prevention 25. Occupational health and safety 26. Violence Prevention 27. Reproductive Health 28. Maternal and infant health 29. Blood Disorders 30. Health statistics 31. State, local, and territorial health 32. Global health 33. COVID-19 34. Other (specify)	
EEP	13.3.3-a	<p>Change Type: Response option revision</p> <p>What is your preference for the location of your project assignment? (Select all that apply)</p> <ol style="list-style-type: none"> 1. CDC headquarters or Atlanta regional campuses (Atlanta, Georgia) 2. Other CDC Regional Campuses 3. Other Federal Agencies 4. State, local, or territorial health departments 5. CDC Country Office (Remote) 	<p>Location Preferences</p> <p>What is your preference for the location of your project assignment? (Select all that apply) *</p> <ul style="list-style-type: none"> <input type="checkbox"/> CDC headquarters or Atlanta regional campuses (Atlanta, Georgia) <input type="checkbox"/> Other CDC Regional Campuses <input type="checkbox"/> Other Federal Agencies <input type="checkbox"/> State, local, or territorial health departments <input type="checkbox"/> CDC Country Office (Remote)

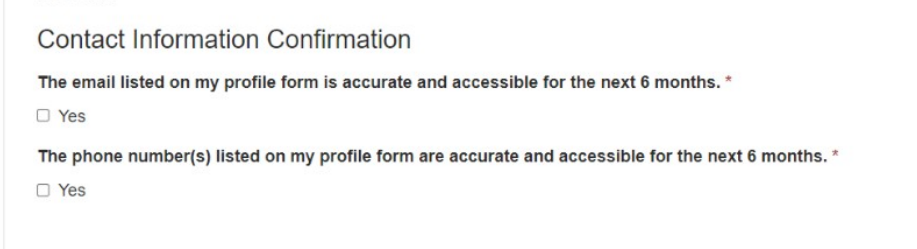
Program	Section	Requested Change	Screenshot
EEP	13.3.3-a	<p>Change type: Question addition</p> <p>Add new question for EEP after What is your preference for the location of your project assignment:</p> <p>What type of work settings are you open to? (select all that apply, please note that the EEP program cannot guarantee a specific work setting):</p> <ul style="list-style-type: none"> - Remote/Full Telework - Hybrid/Partial Telework - In-person 	

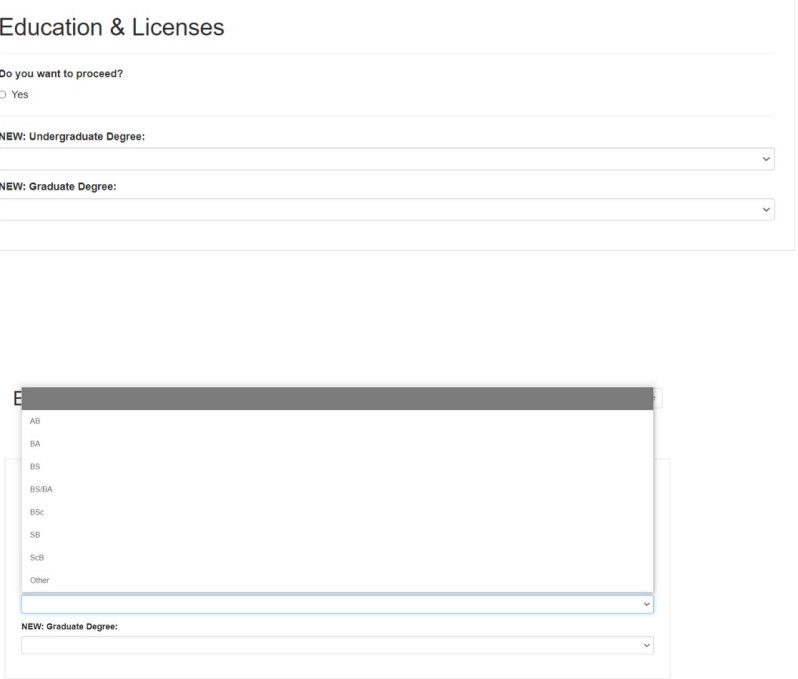
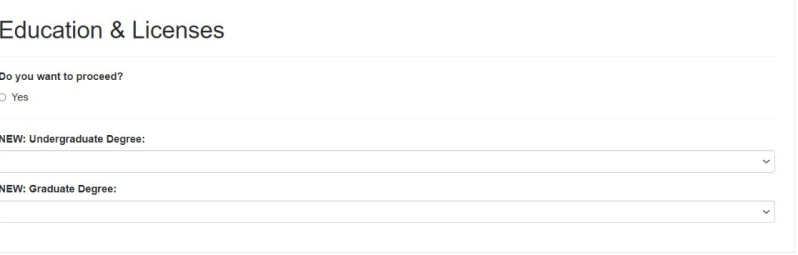
Program	Section	Requested Change	Screenshot
EEP	13.3.3-a	<p>Change Type: Response option revision</p> <p>Other CDC Regional Campuses (Select all that apply):</p> <ol style="list-style-type: none"> 1. Anchorage, Alaska 2. Ft. Collins, Colorado 3. San Juan, Puerto Rico 4. Hyattsville, Maryland 5. Morgantown, West Virginia 6. Cincinnati, Ohio 7. Pittsburgh, Pennsylvania 8. Spokane, Washington 9. Denver, Colorado 10. Durham, North Carolina 11. Washington, DC 12. I am open to locations not listed above 	<p>Location Preferences</p> <p>What is your preference for the location of your project assignment? (Select all that apply) *</p> <ul style="list-style-type: none"> <input type="checkbox"/> CDC headquarters or Atlanta regional campuses (Atlanta, Georgia) <input checked="" type="checkbox"/> Other CDC Regional Campuses <input type="checkbox"/> Other Federal Agencies <input type="checkbox"/> State, local, or territorial health departments <input type="checkbox"/> CDC Country Office (Remote) <p>Other CDC Regional Campuses (Select all that apply): *</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anchorage, Alaska <input type="checkbox"/> Ft. Collins, Colorado <input type="checkbox"/> San Juan, Puerto Rico <input type="checkbox"/> Hyattsville, Maryland <input type="checkbox"/> Morgantown, West Virginia <input type="checkbox"/> Cincinnati, Ohio <input type="checkbox"/> Pittsburgh, Pennsylvania <input type="checkbox"/> Spokane, Washington <input type="checkbox"/> Denver, Colorado <input type="checkbox"/> Durham, North Carolina <input type="checkbox"/> Washington, DC <input type="checkbox"/> I am open to locations not listed above

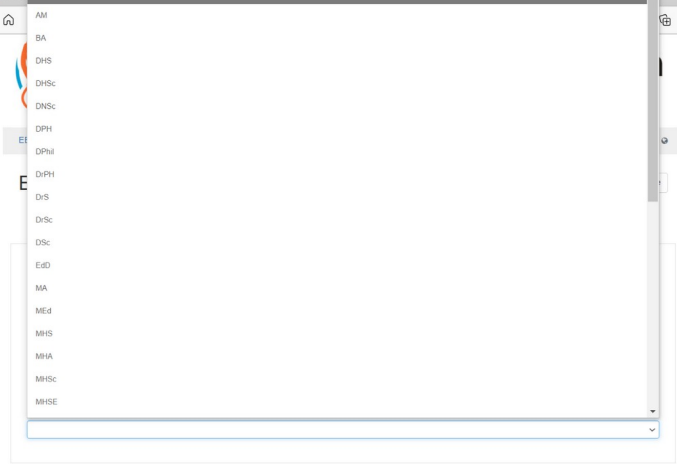
Program	Section	Requested Change	Screenshot
EEP	13.3.3-a	<p>Change Type: Response option revision</p> <p>Other Federal Agencies (Select all that apply):</p> <ol style="list-style-type: none"> 1. National Park Service (Fort Collins, Colorado) 2. National Park Service (Albuquerque, New Mexico) 3. National Park Service (Washington, DC) 4. Indian Health Service (varies) 5. I am open to additional federal agencies not already listed above 	 <p>Location Preferences</p> <p>What is your preference for the location of your project assignment? (Select all that apply) *</p> <ul style="list-style-type: none"> <input type="checkbox"/> CDC headquarters or Atlanta regional campuses (Atlanta, Georgia) <input type="checkbox"/> Other CDC Regional Campuses <input checked="" type="checkbox"/> Other Federal Agencies <input type="checkbox"/> State, local, or territorial health departments <input type="checkbox"/> CDC Country Office (Remote) <p>Other Federal Agencies (Select all that apply): *</p> <ul style="list-style-type: none"> <input type="checkbox"/> National Park Service (Ft. Collins, Colorado) <input type="checkbox"/> National Park Service (Albuquerque, New Mexico) <input type="checkbox"/> National Park Service (Washington, D.C.) <input type="checkbox"/> Indian Health Service (varies) <input type="checkbox"/> I am open to additional federal agencies not already listed above

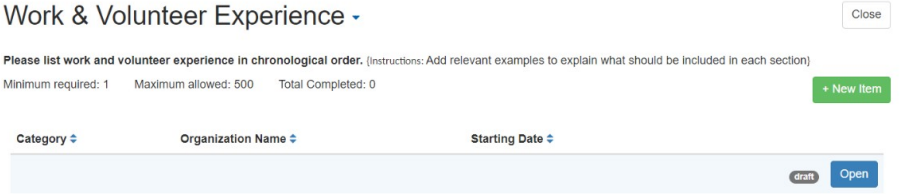
Program	Section	Requested Change	Screenshot
SAF	13.5-a	<p>Change Type: Response option revision</p> <p>First [Second Third] Choice Area:</p> <ol style="list-style-type: none"> 1. Obesity, nutrition, and physical activity 2. Cancer prevention and control 3. Diabetes 4. Heart disease and stroke prevention 5. Tobacco prevention and cessation 6. Other chronic disease 7. Emergency preparedness and response 8. Asthma and air pollution 9. Environmental health 10. Immunizations/vaccine preventable disease 11. Influenza 12. HIV/AIDS, or Tuberculosis 13. STD prevention 	 <p>Obesity, nutrition, and physical activity</p> <p>Cancer prevention and control</p> <p>Diabetes</p> <p>Heart disease and stroke prevention</p> <p>Tobacco prevention and cessation</p> <p>Other chronic disease</p> <p>Emergency preparedness and response</p> <p>Asthma and air pollution</p> <p>Environmental health</p> <p>Immunizations/vaccine preventable disease</p> <p>Influenza</p> <p>HIV/AIDS, or Tuberculosis</p> <p>SAF: Second Choice Area</p> <p>SAF: Third Choice Area</p> <p><i>Note: not possible to show all response options in one screenshot.</i></p>

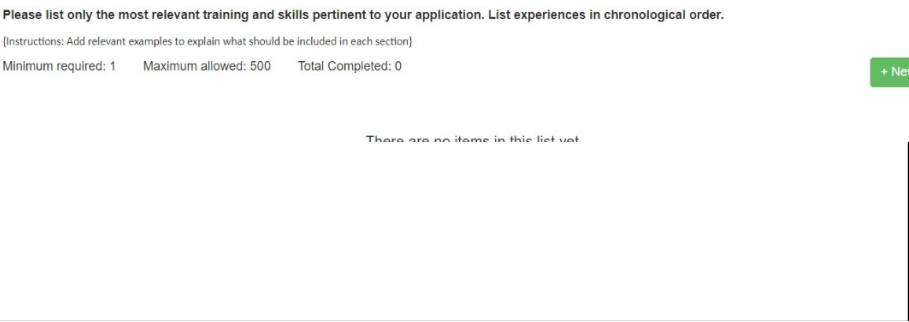
Program	Section	Requested Change	Screenshot
		<p>14. Viral hepatitis</p> <p>15. Foodborne diseases</p> <p>16. Waterborne diseases</p> <p>17. Vectorborne diseases</p> <p>18. Fungal Diseases</p> <p>19. One Health and zoonotic disease</p> <p>20. Arctic Investigations (Alaska)</p> <p>21. Healthcare-associated infections</p> <p>22. Quarantine and border health services</p> <p>23. Unintentional injury</p> <p>24. Opioid/prescription drug overdose prevention</p> <p>25. Occupational health and safety</p> <p>26. Violence Prevention</p> <p>27. Reproductive Health</p> <p>28. Maternal and infant health</p> <p>29. Blood Disorders</p> <p>30. Health statistics</p>	

Program	Section	Requested Change	Screenshot
		31. State, local, and territorial health 32. Global health 33. COVID-19 34. Other (specify)	
EEP	15	<p>Change type: Question deletion, instructional text revision</p> <p>Change item to read (remove questions 3 and 4):</p> <p>Contact Information Confirmation</p> <p>You can view and update your contact information in the EEP Fellowship Application Portal under Applicant Profile. We will be using this information to contact you regarding application status and match.</p> <ol style="list-style-type: none"> 1. The email listed on my profile form is accurate and accessible for the next 6 months. (Yes) 2. The phone number(s) listed on my profile form are accurate and accessible for the next 6 months. (Yes) 	 <p>Contact Information Confirmation</p> <p>The email listed on my profile form is accurate and accessible for the next 6 months. *</p> <p><input type="checkbox"/> Yes</p> <p>The phone number(s) listed on my profile form are accurate and accessible for the next 6 months. *</p> <p><input type="checkbox"/> Yes</p>

Program	Section	Requested Change	Screenshot
EEP	Degree List	<p>Change Type: Response option revision</p> <p>Create separate Undergraduate and Graduate Degree lists, with undergraduate list changed to:</p> <p>AB</p> <p>BA</p> <p>BS</p> <p>BS/BA</p> <p>BSc</p> <p>SB</p> <p>ScB</p> <p>Other</p>	 <p>The screenshot shows a web form titled "Education & Licenses". It contains a question "Do you want to proceed?" with a radio button for "Yes". Below this are two dropdown menus: "NEW: Undergraduate Degree:" and "NEW: Graduate Degree:". A smaller inset screenshot shows the "NEW: Graduate Degree:" dropdown menu expanded, listing the following options: AB, BA, BS, BS/BA, BSc, SB, ScB, and Other.</p>
EEP	Degree List	<p>Change Type: Response option revision</p> <p>Create separate Undergraduate and Graduate Degree lists, with graduate list changed to:</p> <p>AM</p> <p>BA</p> <p>DHS</p>	 <p>The screenshot shows a web form titled "Education & Licenses". It contains a question "Do you want to proceed?" with a radio button for "Yes". Below this are two dropdown menus: "NEW: Undergraduate Degree:" and "NEW: Graduate Degree:". A smaller inset screenshot shows the "NEW: Graduate Degree:" dropdown menu expanded, listing the following options: AM, BA, and DHS.</p>

Program	Section	Requested Change	Screenshot
		DHSc DNSc DPH DPhil DrPH DrS DrSc EdD MA MEd MHS MHSc MHSE MN MPH MPhil MPHTM MPVM	 <p data-bbox="1024 768 1801 800"><i>Note: not possible to show all response options in one screenshot.</i></p>

Program	Section	Requested Change	Screenshot
		MS MSVPH MSc MScPH MSPH MTM&H PhD SB ScB ScD ScM SM Other	
LLS, EIS	8.1-a Adding Work or Volunteer Experience	Change Type: Instructional Text Revision <i>{Instructions: Add relevant examples to explain what should be included in each section}</i>	

Program	Section	Requested Change	Screenshot
LLS, EIS	9.5-1. Additional Training, Certifications, or Professional Development Fields	Change Type: Instructional Text Revision {Instructions: <i>Add relevant examples to explain what should be included in each section</i> }	
All	I. Field Value Tables	Change Type: Response option revision Add American Samoa	