**OMB Control Number 0920-0765 Fellowship Management System Change Request  
Attachment 3 – Activity Tracking Module Screenshots**

| **Program** | **Page/ Section** | **Requested Change** | **Screenshot** |
| --- | --- | --- | --- |
| EEP | 5.2-a | **Change type: Question/Response option revision**  Handbook Acknowledgement (Required for all students):   1. Completed |  |
| EEP | 5.2-a | **Change type: Question/Response option revision**  669A SWEP Volunteer Agreement (Required for all students):   1. Completed |  |
| EEP | 5.2-a | **Change type: Question/Response option revision**  669C SWEP Statement of Duties Agreement (Required for all students):   1. Completed |  |
| EEP | 5.2-a | **Change type: Question/Response option revision**  Change to:  1438 SWEP E-QIP Initiation Form (Required for all students):   1. Completed |  |
| EEP | 5.2-a | **Change type: Question/Response option revision**  Change to:  Provided your SSN to EEP Program (Required for all students):   1. Completed |  |
| EEP | 5.2-a | **Change type: Question/Response option revision**  Change to:  Safety Survival Skills Exam (SSS):   1. Completed 2. Not applicable |  |
| EEP | 5.2-a | **Change type: Question/Response option revision**  Change to  Security Awareness Training (SAT):   1. Completed 2. Not applicable |  |
| EEP | 5.2-a | **Change type: Response option revision**  Change to:  Personnel security background investigation completed by Office of Safety, Security, and Asset Management (OSSAM):   1. Completed 2. Not applicable |  |
| EEP | 5.2-a | **Change type: Response option revision**  Change to:  Fingerprinting:   1. Completed 2. Not applicable |  |
| EEP | 5.3-c | **Change type: Response option revision**  Change to:  Principles of Epidemiology for Public Health Practice Course (See program handbook) (Optional for all students):   1. Completed 2. Not applicable |  |
| EEP | 5.3-c | **Change type: Question deletion**  REMOVE ActivEpi Course (See program handbook) (Optional for all students):  Completed | *N/A – Field will be removed for EEP Activity Tracking.* |
| EEP | 5.3-c | **Change type: Question deletion**  REMOVE Online Public Health Ethics Course (See program handbook) (Optional for all students):  Completed | *N/A – Field will be removed for EEP Activity Tracking.* |
| EEP | 5.3-c | **Change type: Response option revision**  Return CDC SmartCard to Supervisor (Required for CDC-based students):   1. Completed 2. Not applicable |  |
| EEP | 5.3-c | **Change type: Response option revision**  Return computer and all other equipment provided:   1. Completed 2. Not applicable |  |
| EEP | 7.1.1.1.a | **Change type: Question addition**  Add new question:  How would you describe your connection with other EEP students following the orientation? [MULTIPLE CHOICE] (very connected, somewhat connected, a little connected, not at all connected) |  |
| EEP | 7.1.1.4.a | **Change type: Question addition**  Questions currently listed on screenshot should apply to All Students. Please combine current All Students and CDC Students Only sections into a single All Students section. | Screenshots remain the same as what is current in eFMS 2.0 OMB package. |
| EEP | 7.1.1.4.a | **Change type: Response option revision**  Change to:  Did you receive your computer?   1. Yes 2. No 3. Not applicable |  |
| EEP | 7.1.1.4.a | **Change type: Response option revision**  Change to:  When do you expect to receive your computer?   1. This week 2. Next week 3. Not sure 4. Not applicable |  |
| EEP | 7.1.1.4.a | **Change type: Response option revision**  Change to:  Did you receive your SmartCard?   1. Yes 2. No 3. Not applicable |  |
| EEP | 7.1.1.4.a | **Change type: Response option revision**  Change to:  When do you expect to receive your SmartCard?   1. This week 2. Next week 3. Not sure 4. Not applicable |  |
| EEP | 7.1.1.4.a | **Change type: Instructional text revision**  Below “Please confirm that the email provided in your Profile is current and permanent,” add a new section for “Orientation Travel”. This section should only be completed by students not based in Atlanta for EEP. |  |
| EEP | 7.1.1.4.a | **Change type: Question addition**  In Orientation Travel section, add:  What went well during the travel planning process? [OPEN ENDED] |  |
| EEP | 7.1.1.4.a | **Change type: Question addition**  In Orientation Travel section, add:  Please describe what could be improved for future EEP students traveling to and staying in Atlanta during orientation. [OPEN ENDED] |
| EEP | 7.1.1.4.a | **Change type: Question addition**  In Orientation Travel section, add:  What challenges, if any, did you experience traveling to Atlanta for orientation? [OPEN ENDED] |
| EEP | 7.1.1.4.a | **Change type: Question addition**  In Orientation Travel section, add:  What do you recommend to improve the travel and lodging process for EEP students traveling for orientation in the future? [OPEN ENDED] |
| EEP | 7.1.2.1.f | **Change type: Response option revision**  Change to:  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. Provided an overview of organization and how our work fits into a public health mission 4. Met with me each week to provide any feedback 5. Connected me with other professionals 6. Facilitated my participation in professional or educational activities within CDC 7. Other |  |
| EEP | 7.1.2.1.f | **Change type: Question addition**  Add:  I received adequate support from my host site supervisor to complete my projects. (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree) |  |
| EEP | 7.1.2.1.f | **Change type: Question addition**  Add:  Overall, I was satisfied with the guidance I received from my host site for my projects. (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree) |
| EEP | 45/7.1.2.1.f | **Change type: Question addition**  Add:  My supervisor provided me with resources to help me complete my project(s). (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree) |
| EEP | 7.1.2.1.f | **Change type: Question addition**  Add:  My supervisor provided me with timely feedback on my work. (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree) |
| EEP | 7.1.2.1.f | **Change type: Question addition**  Add:  Overall, I was satisfied with the mentorship I received at my host site. (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree) |
| EEP | 7.1.2.1.g | **Change type: Question revision**  Change to:  Did you assist in a public health response activity (e.g., an Epi-Aid, EOC deployment, field investigation, other large-scale response, or similar)? |  |
| EEP | 7.1.2.1.g | **Change type: Question addition**  Add new question for EEP:  Which type(s) of public health response activities did you participate in? Select all that apply:   * Epi-Aid * CDC Emergency Operations Center (EOC) deployment * State, tribal, local, or territorial field investigation within your host site jurisdiction * Other field investigation/field deployment * Other: [DESCRIBE] |  |
| EEP | 7.1.2.1.g | **Change type: Question revision**  Change question to:  Which CDC Center/Institute/Office(s) did you support during your public health response activity (e.g., an Epi-Aid, EOC deployment, field investigation, other large-scale response, or similar)? (Select all that apply) |  |
| EEP | 7.1.2.1.g | **Change type: Response option revision**  Change values to allow EEP student to select from the Center/Division/Branch Lookup OR choose one of the following options:   * Other * N/A |
| EEP | 7.1.2.1.h | **Change type: Question revision**  Change to:  Briefly describe your responsibilities in the public health response activity (e.g., an Epi-Aid, EOC deployment, field investigation, other large-scale response, or similar): |  |
| EEP | 7.1.2.1.h | **Change type: Question revision**  Change to:  Participation in a public health response activity (e.g., an Epi-Aid, EOC deployment, field investigation, other large-scale response, or similar) increased my understanding of public health concepts through hands-on experience. |  |
| EEP | 7.1.2.1.h | **Change type: Question revision**  Change to:  Participation in a public health response activity (e.g., an Epi-Aid, EOC deployment, field investigation, other large-scale response, or similar) increased my interest in pursuing a public health career. |
| EEP | 7.1.2.1.h | **Change type: Question revision**  Change to:  Participation in a public health response activity (e.g., an Epi-Aid, EOC deployment, field investigation, other large-scale response, or similar) connected me with additional public health professionals. |
| EEP | 7.1.2.3.a | **Change type: Question addition**  Add [for all students]:  Overall, I am satisfied with my host site experience. (Strongly disagree, disagree, neither agree nor disagree, agree, strongly agree) |  |
| EEP | 7.1.2.3.a | **Change type: Question addition**  Add [for all students]:  What were the most valuable parts of your host site experience? [OPEN-ENDED] |  |
| EEP | 7.1.2.3.a | **Change type: Question addition**  Add [for all students]:  What were the most challenging parts of your host site experience? [OPEN-ENDED] |
| SAF | 7.2.1.1.a | **Change type: Question revision**  Change to:   1. In the past school year, which resource(s) did you use to teach public health? (Select all that apply) 2. N/A 3. CDC Science Ambassador Fellowship Lesson Plans/Activities 4. CDC NERD Academy 5. CDC Website 6. Other Lesson Plans/Activities Other Lesson Plans/Activities (e.g., Young Epidemiology Scholars Lesson Plans) or Websites (e.g., Medical Detectives). Please provide at least 1-2 examples: |  |
| SAF | 7.2.1.1.a | **Change type: Question revision**  Change to:  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. No, and I do not plan to incorporate public health into my current course.  5. N/A |  |
| SAF | 8.1.2.a | **Change type: Question deletion**  Remove section 8.1.2.a from SAF Activity Tracking module | *N/A – Fields/section will be removed for SAF Activity Tracking.* |
| SAF | 8.2.3.a | **Change type: Question deletion**  Remove section 8.2.3.a from SAF Activity Tracking module | *N/A – Fields/section will be removed for SAF Activity Tracking.* |
| SAF | 8.3.2.a | **Change type: Question deletion**  Remove section 8.3.2.a from SAF Activity Tracking module | *N/A – Fields/section will be removed for SAF Activity Tracking.* |
| SAF | 8.4.2.b | **Change type: Question deletion**  Remove section 8.4.2.b from SAF Activity Tracking module | *N/A – Fields/section will be removed for SAF Activity Tracking.* |
| SAF | 8.6.2.b | **Change type: Question deletion**  Remove section 8.6.2.b from SAF Activity Tracking module | *N/A – Fields/section will be removed for SAF Activity Tracking.* |
| EIS | 8.6.2.a Activity Review Fields | **Change type: Question revision**  On a scale of 1-5 where 1=very poor and 5=excellent, please rate the overall quality of this activity or its associated deliverables/products.   * 1=very poor * 2=poor * 3=fair * 4=good * 5=excellent |  |
| All | 1. Field Table Values | **Change type: Response option revision**  Add American Samoa |  |