

ORWH Courses Registration

Section 1

Section 2

Section 3

Section 4

Section 5

OMB#: 0925-0740 Exp Date: 07/31/2022

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Section 1: Contact Information

1. First name *

2. Last name *

3. Email address *

4. Work Address (City, State, Country)

Save

Next

Clear

Director's Messages

- Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019
- ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019
- Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019
- A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

Section 1

Section 2

Section 3

Section 4

Section 5

Section 2: Demographic Information

Note to respondents: Questions 5-8 ask about ethnicity, race, sex, and gender. These questions are optional and will help us identify demographic trends across learners in order to inform outreach and future course development. The questions are asked in the format required by the Office of Management and Budget (OMB).

5. Which of the following best describes your ethnicity?

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino
- ☐ Decline to answer

6. Which of the following best describes your race?

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Decline to answer

7. What sex were you assigned at birth, on your original birth certificate?

- ☐ Male
- ☐ Female
- ☐ Don't know
- ☐ Decline to answer

8. Do you currently describe yourself as male, female or transgender?

- ☐ Male
- ☐ Female
- ☐ Transgender
- ☐ None of these

9. Are you taking this course for Continuing Education credits?*

- ☐ Yes
- ☐ No

Save

Previous

Next

Clear

Director's Messages

- Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019
- ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019
- Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019
- A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

9. Are you taking this course for Continuing Education credits?*

☒ Yes

☐ No

9a. CE learners only: Please provide your complete mailing address, including city, state and postal code.*

9b. CE learners only: Are you a:*

☐ Physician

☐ Non-Physician

9c. CE learners only: Are you seeking:*

☐ CME credits

☐ CNE credits

☐ CPE credits

☐ Other

9d. CE learners only: Please list your specialty(ies):*

Save

Previous

Next

Clear

Section 1

Section 2

Section 3

Section 4

Section 5

Section 3: Employment Information

10. Which of the following best describes your employment sector?

- ☐ Academic/university
- ☐ Nonprofit
- ☐ Private sector
- ☐ Public sector
- ☐ Other

11. If you are a researcher, which of the following best describes your career stage?

- ☐ Pre-Doctoral Fellow
- ☐ Doctoral Student
- ☐ Post-Doctoral Fellow
- ☐ Assistant Professor
- ☐ Associate Professor
- ☐ Full professor
- ☐ Other faculty
- ☐ Independent Investigator
- ☐ Scientist Government

12. Which of the following best describes your current job?

- ☐ Administrative/program support
- ☐ Analyst
- ☐ Clinical/patient care
- ☐ Communications
- ☐ Professor/lecturer
- ☐ Regulatory
- ☐ Researcher/Investigator (Basic Research)
- ☐ Researcher/Investigator (Clinical Research)
- ☐ Student
- ☐ Other

Save

Previous

Next

Clear

Director's Messages

- **Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action**
October 1, 2019
- **ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development**
September 26, 2019
- **Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job**
September 24, 2019
- **A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels**
July 17, 2019

Section 1

Section 2

Section 3

Section 4

Section 5

Section 3: Employment Information

10. Which of the following best describes your employment sector?

- ☐ Academic/university
- ☐ Nonprofit
- ☐ Private sector
- ☒ Public sector
- ☐ Other

10a. Are you an NIH or FDA employee?

- None - ▾

- None -

NIH

FDA

Other public sector

11. Which of the following best describes your career stage?

- ☐ Associate Professor
- ☐ Full professor
- ☐ Other faculty
- ☐ Independent Investigator
- ☐ Scientist Government

12. Which of the following best describes your current job?

- ☐ Administrative/program support
- ☐ Analyst
- ☐ Clinical/patient care
- ☐ Communications
- ☐ Professor/lecturer
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- ☐ Researcher/Investigator (Basic Research)
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Save

Previous

Next

Clear

Director's Messages

- Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019
- ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019
- Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019
- A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

WOMEN'S HEALTH ▾SEX & GENDER ▾IN THE SPOTLIGHT ▾SCIENCE POLICY ▾CAREER DEVELOPMENT & EDUCATION ▾ABOUT ▾

Section 1>Section 2>Section 3>Section 4>Section 5

Section 3: Employment Information

10. Which of the following best describes your employment sector?

☐ Academic/university

☐ Nonprofit

☐ Private sector

☒ Public sector

☐ Other

10a. Are you an NIH or FDA employee?

NIH ▾

What is your ICO?

- None - ▾

- None -

NIH NCI

NIH NEI

NIH NHLBI

NIH NHGRI

NIH NIA

NIH NIAAA

NIH NIAID

NIH NIAMS

NIH NIBIB

NIH NICHD

NIH NIDCD

NIH NIDCR

NIH NIDDK

NIH NIDA

NIH NIEHS

NIH NIGMS

NIH NIMH

NIH NIMHD

Which of the following best describes your career stage?

Which of the following best describes your current job?

Support

Basic Research)

Clinical Research)

Save

Previous

Next

Clear

Director's Messages

■ Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019

■ ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019

■ Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019

■ A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

WOMEN'S HEALTH ▾SEX & GENDER ▾IN THE SPOTLIGHT ▾SCIENCE POLICY ▾CAREER DEVELOPMENT & EDUCATION ▾ABOUT ▾

Section 1>Section 2>Section 3>Section 4>Section 5

Section 3: Employment Information

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☐ Academic/university

☐ Nonprofit

☐ Private sector

☒ Public sector

☐ Other

10a. Are you an NIH or FDA employee?

FDA ▾

What is your FDA work center?

- None - ▾

- None -

FDA CBER

FDA CDER

FDA CDRH

FDA CFSAN

FDA CTP

FDA CVM

FDA NCTR

FDA OC

FDA ORA

FDA Other

Which of the following best describes your career stage?

☐ Clinical/patient care

☐ Communications

☐ Professor/lecturer

☐ Regulatory

☐ Researcher/Investigator (Basic Research)

☐ Researcher/Investigator (Clinical Research)

☐ Student

☐ Other

Save

Previous

Next

Clear

Director's Messages

■ Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019

■ ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019

■ Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019

■ A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

7

Section 1

Section 2

Section 3

Section 4

Section 5

Section 3: Employment Information

10. Which of the following best describes your employment sector?

- ☐ Academic/university
- ☐ Nonprofit
- ☐ Private sector
- ☐ Public sector
- ☒ Other

What is your organizational affiliation?

11. If you are a researcher, which of the following best describes your career stage?

- ☐ Pre-Doctoral Fellow
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[Save](#)[Previous](#)[Next](#)[Clear](#)

Director's Messages

- Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019
- ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019
- Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019
- A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

ORWH Courses Registration

Section 1 Section 2 Section 3 Section 4 Section 5

Section 4: Education & Degree Information

13. Please select your degree(s) from the list below.*

- | | | |
|----------------------------------|-----------------------------------|---|
| ☐ Ph.D | ☐ M.S. | ☐ B.S.N. |
| ☐ Pharm.D | ☐ M.S.N. | ☐ B.S. |
| ☐ Dr.P.H | ☐ M.S.P.H. | ☐ R.N. |
| ☐ DrEd | ☐ M.Ed. | ☐ D.N.P. |
| ☐ D.D.S. | ☐ M.D. | ☐ None |
| ☐ M.P.H. | ☐ D.O. | ☐ Prefer not to answer |
| ☐ M.P.P. | ☐ D.V.M. | ☐ Other |
| ☐ M.H.S. | ☐ D.Sc. | |

Note: An answer is required for learners seeking Continuing Education credits.

14. In what year did you complete your degree?

15. What is your general field of training?

- | | |
|---|--|
| ☐ Biological/Biomedical Sciences | ☐ Mathematics |
| ☐ Health Sciences | ☐ Engineering |
| ☐ Chemistry | ☐ Psychology |
| ☐ Physics | ☐ Social Sciences |
| ☐ Computer Sciences | ☐ Other Fields |

Save

Previous

Next

Clear

Director's Messages

- Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019
- ORWH Contributes \$1 Million to NIH HEAL Initiative to Evaluate Impact of Opioids on Human Development
September 26, 2019
- Research Shows Us How to Address Underrepresentation of Women in Academic Medicine; Now Let's Finish the Job
September 24, 2019
- A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019

ORWH Courses Registration

Section 1 Section 2 Section 3 Section 4 Section 5

Section 5

16. Have you ever applied for federal funding to support your research or training?

- ☐ Research
- ☐ Training
- ☐ Both
- ☐ Neither

17. Have you ever received federal funding to support your research or training?

- ☐ Research
- ☐ Training
- ☐ Both
- ☐ Neither

18. How did you hear about this course?

- ☐ NIH ORWH listserv
- ☐ FDA OWH listserv
- ☐ NIH ORWH newsletter/quarterly publication
- ☐ FDA OWH newsletter
- ☐ ORWH/OWH website
- ☐ Professional conference/meeting
- ☐ Internet search
- ☐ Colleague/Mentor
- ☐ Social media
- ☐ Other

Math question*

1 + 9 =

Solve this simple math problem and enter the result. E.g. for 1+3, enter 4.

Save

Previous

Submit

Clear

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- Guest Blog—Intimate Partner Violence: Raising Awareness, Taking Action
October 1, 2019
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September 26, 2019
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September 24, 2019
- A Game-Changing Pledge to Bring Greater Diversity to Scientific Panels
July 17, 2019