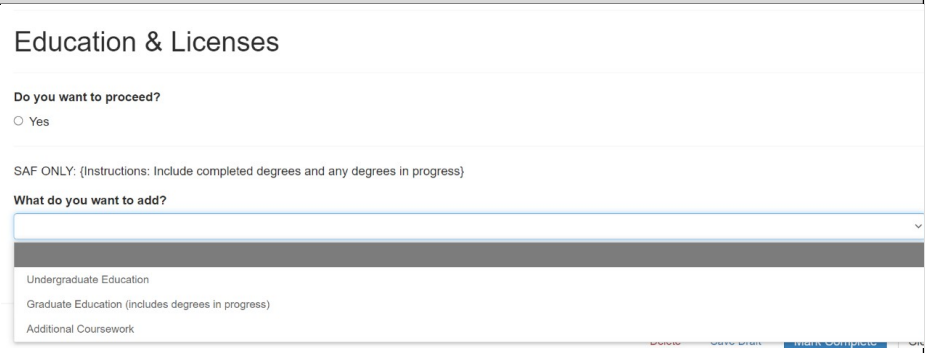
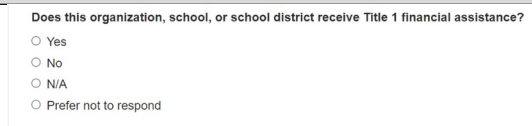
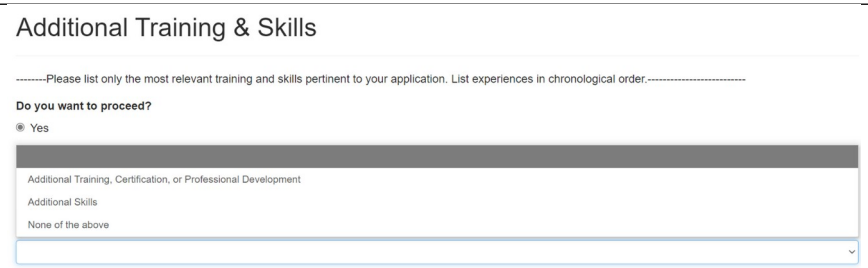
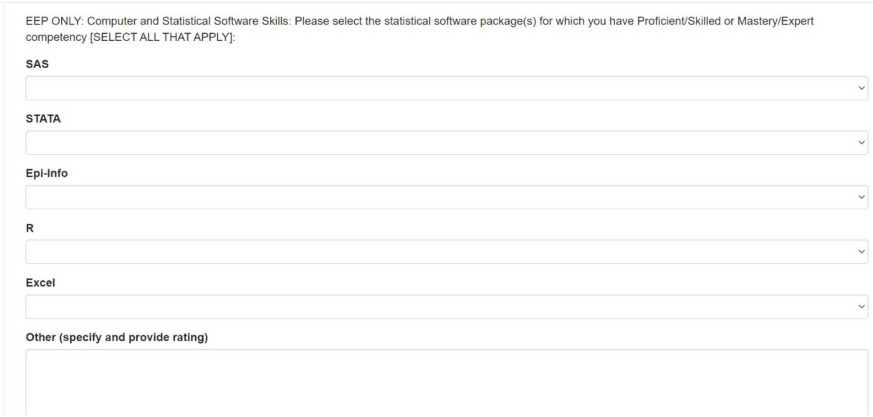
OMB Control Number 0920-0765 Fellowship Management System Change Request
Attachment 1 – Application Module Screenshots

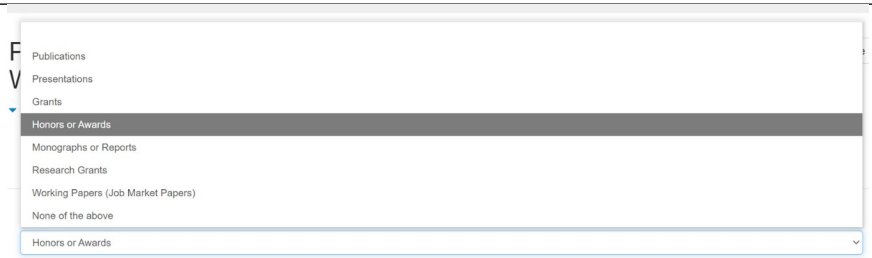
Program	Section	Requested Change	Screenshot
All	13.2-a	**Change Type: Question revision**	Which of the following most influenced you to apply to this fellowship? ☐ Handshake (e.g., job posting, fellow/alumni ambassador) ☐ Other job search platform (e.g., Indeed, ZipRecruiter, Job Openings for Economists) ☐ In-person event (e.g., conference booth) ☐ News advertising (e.g., online ad, news media) ☐ Newsletter or email listserv (e.g., from CDC, your university, professional organization) ☐ Social Media (e.g., Facebook, LinkedIn, Instagram, Twitter, YouTube) ☐ Webinar or other virtual event (e.g., information session, alumni panel) ☐ Word of mouth (e.g., from current or former fellow, professor, supervisor) ☐ Other (please specify)
	13.2-a	**Change type: Question deletion**	
	13.2-a	**Change type: Question deletion**	

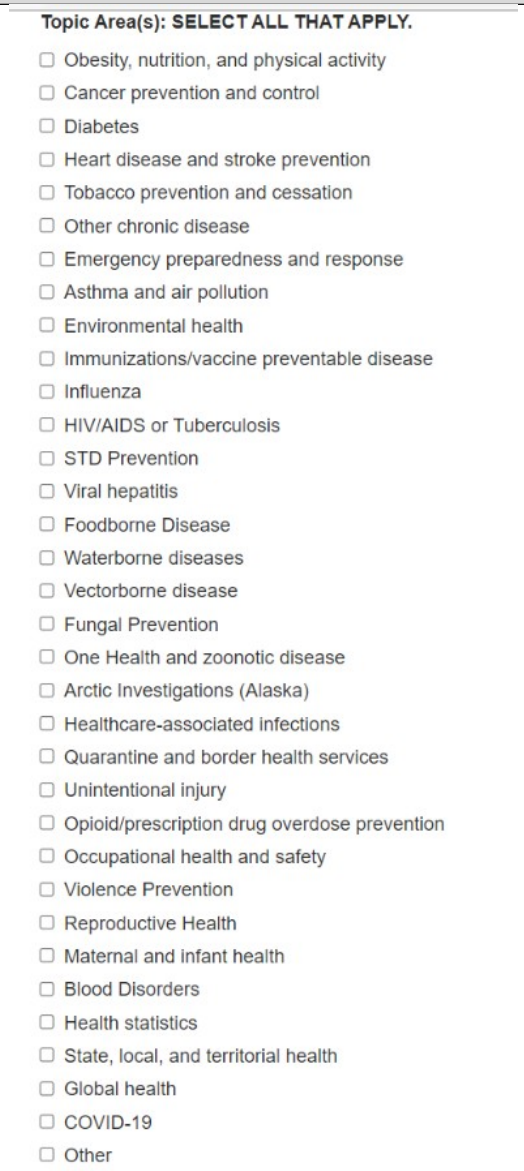
Program	Section	Requested Change	Screenshot
SAF	6.6	**Change type: Question addition** In the past 5 years, in which ways have you interacted with the Science Ambassador program? Options [SELECT ALL THAT APPLY]: 1. Attended a CDC Science Ambassador regional training workshop 2. Previously applied to 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	
SAF	6.6	**Change type: Question deletion** Do you have a current teaching license in your state?	*N/A - This field will be hidden for the SAF Fellow Application.*

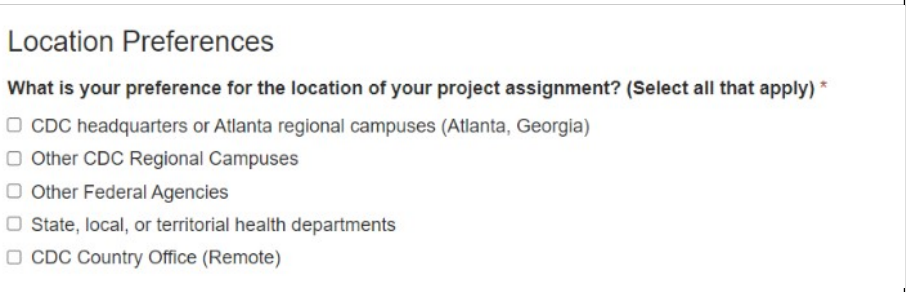
Program	Section	Requested Change	Screenshot
SAF	7.2-a	**Change type: Question deletion** 4. Active U.S. License (due to limitation of eFMS, a new question must be added for SAF): {Instructions: Include completed degrees and any degrees in progress} Do you want to add? 1. Undergraduate Education 2. Graduate Education (includes degrees in progress) 3. Additional Coursework	
All	7.2-a	**Change Type: Response option revision** 2. Graduate Education to 2. Graduate Education (including degrees in progress)	
SAF	7.9-a	**Change type: Question deletion** Remove for SAF	*N/A - These fields will be hidden for the SAF Fellow Application.*
All	7.11-a	**Change Type: Question revision** Incomplete Reason (Note: List expected graduation date if degree is still in progress):	

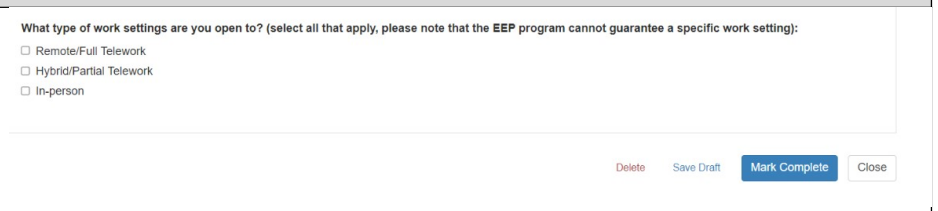
Program	Section	Requested Change	Screenshot
1q11SAF	8.3-a	**Change Type: Question revision** Does this organization, school, or school district receive Title 1 financial assistance?	
SAF	8.3-a	**Change Type: Response option revision** Add additional answer option: 4. Prefer not to respond	
SAF	9.2-a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

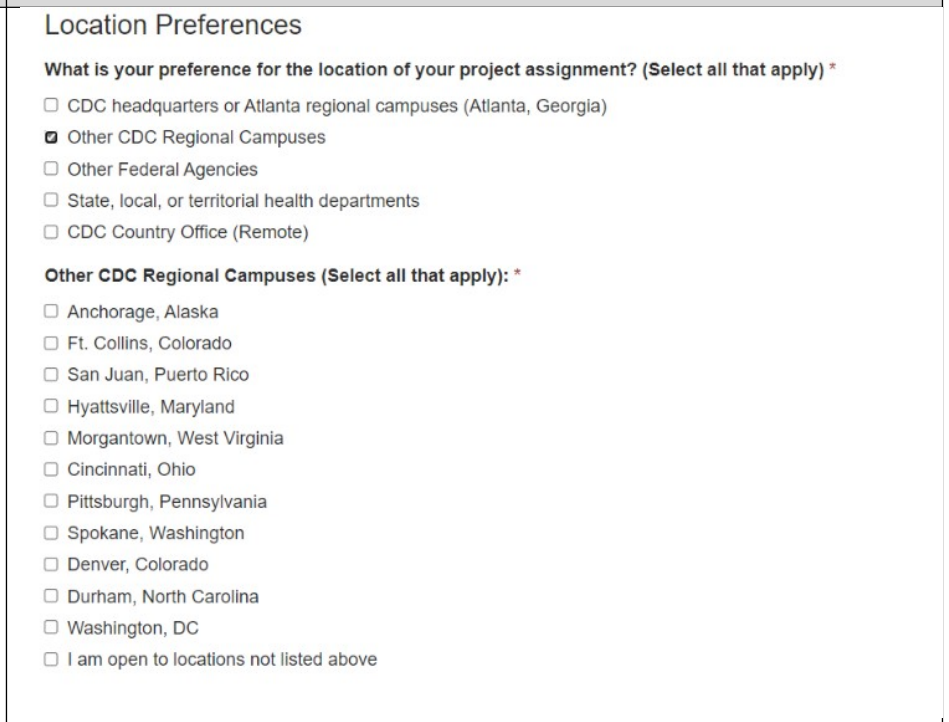
Program	Section	Requested Change	Screenshot
		Add response: 1. Additional Skills **Due to limitations of eFMS, a new question must be created for SAF:** What do you need to add? 1. Additional Training, Certification or Professional Development 2. Additional Skills 3. None of the Above	
EEP	New section if possible: 9.9	**Change type: Question addition** Please select the statistical software package(s) for which you have Proficient/Skilled or Mastery/Expert competency [SELECT ALL THAT APPLY]: Entry/Novice - Limited capabilities - Little or no experience Proficient/Skilled - Basic capabilities - Moderate amount of experience Mastery/Expert - Advanced capabilities - Extensive experience	

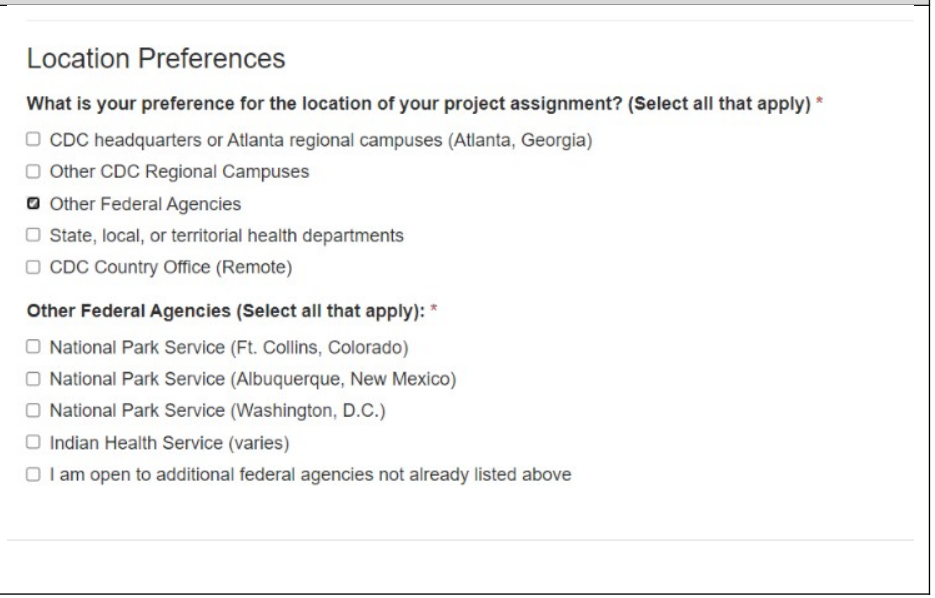
Program	Section	Requested Change	Screenshot
		1. SAS 2. STATA 3. Epi-Info 4. R 5. Excel 6. Other: [Open-ended]	
All applicable programs	10.2-a	**Change Type: Question revision** 4. Honor or Awards to 4. Honors or Awards	
EEP	11.1-a	**Change type: Question deletion**	*N/A – This field will be hidden for the EEP Fellow Application.*

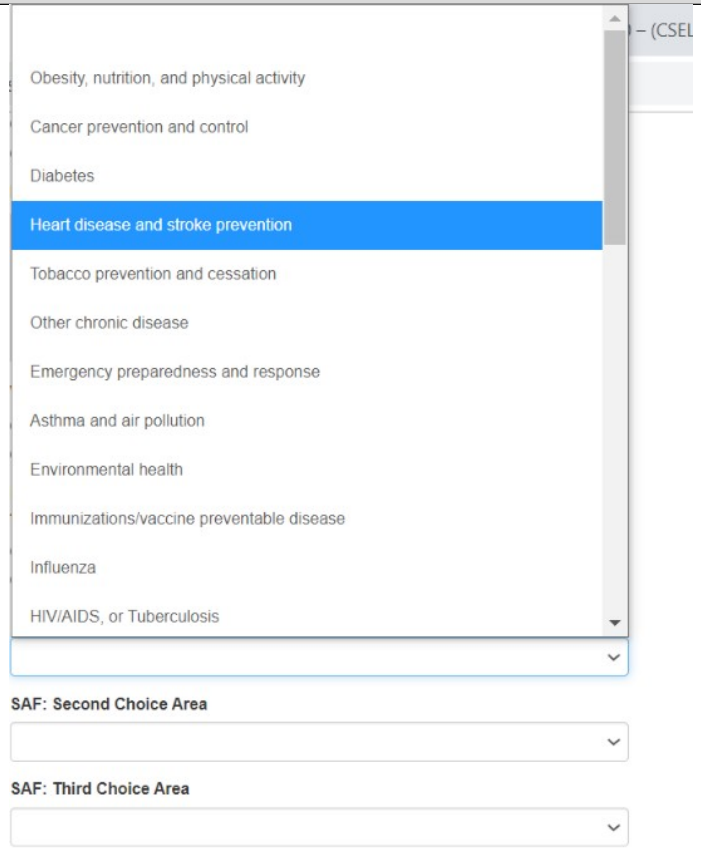
Program	Section	Requested Change	Screenshot
EEP	13.3.2-a	**Change Type: Response option revision** Topic area(s): [SELECT ALL THAT APPLY] Note: added options are 13, 18, 27, 28, 29, 33, 34 1. Obesity, nutrition, and physical activity 2. Cancer prevention and control 3. Diabetes 4. Heart disease and stroke 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	

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	**Change Type: Response option revision** What is your preference for the location of your project assignment? (Select all that apply) 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)	

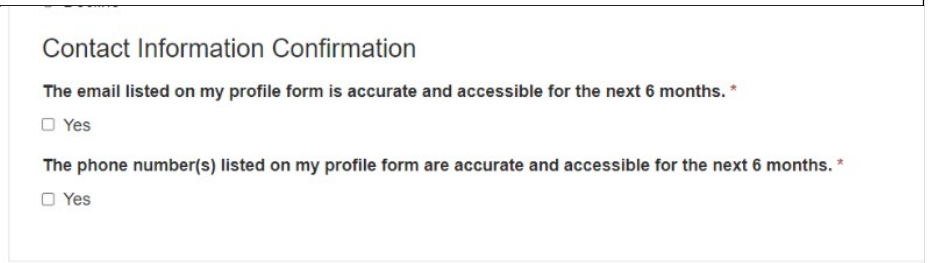
Program	Section	Requested Change	Screenshot
EEP	13.3.3-a	**Change type: Question addition** Add new question for EEP after What is your preference for the location of your project assignment: What type of work settings are you open to? (select all that apply, please note that the EEP program cannot guarantee a specific work setting): - Remote/Full Telework - Hybrid/Partial Telework - In-person	

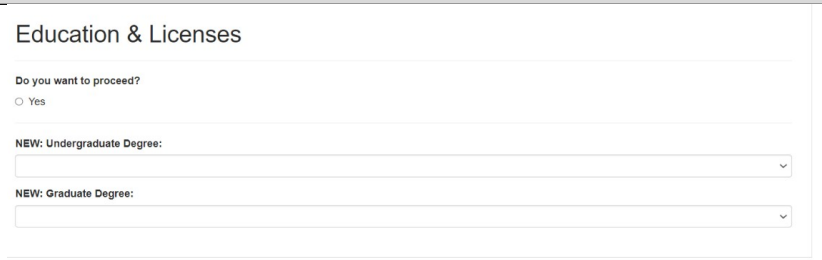
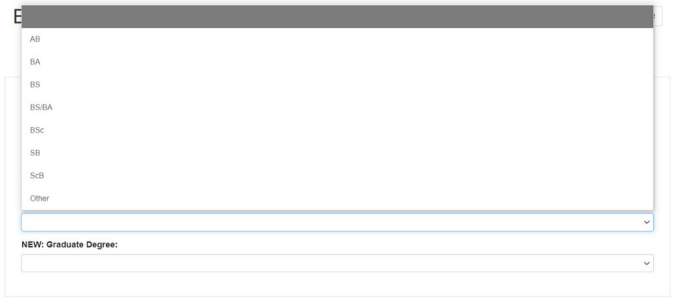
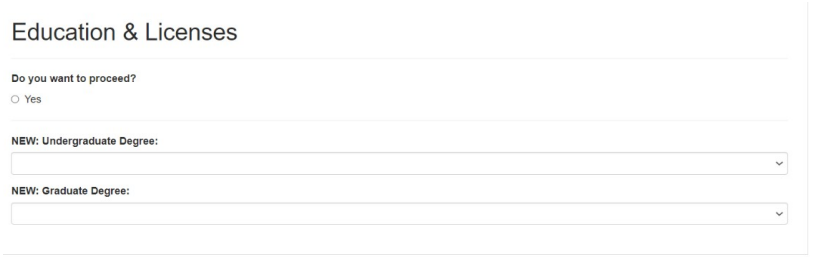
Program	Section	Requested Change	Screenshot
EEP	13.3.3-a	**Change Type: Response option revision** Other CDC Regional Campuses (Select all that apply): 1. Anchorage, Alaska 2. Ft. Collins, Colorado 3. San Juan, Puerto Rico 4. Hyattsville, Maryland 5. Morgantown, West Virginia 6. Cincinnati, Ohio 7. Pittsburgh, Pennsylvania 8. Spokane, Washington 9. Denver, Colorado 10. Durham, North Carolina 11. Washington, DC 12. I am open to locations not listed above	

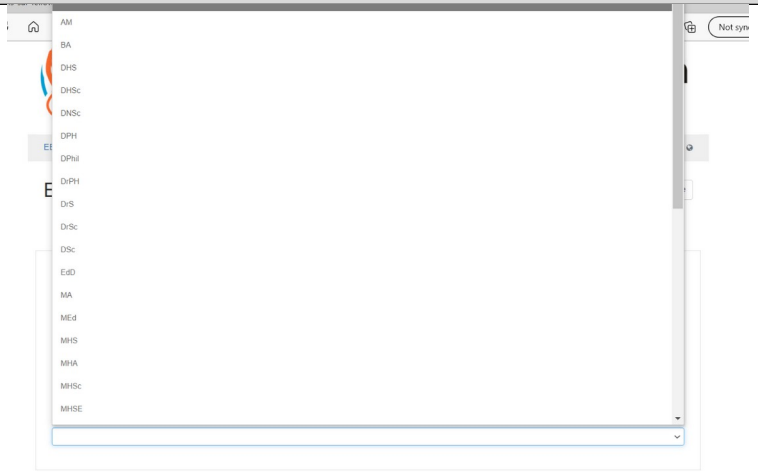
Program	Section	Requested Change	Screenshot
EEP	13.3.3-a	**Change Type: Response option revision** Other Federal Agencies (Select all that apply): 1. National Park Service (Fort Collins, Colorado) 2. National Park Service (Albuquerque, New Mexico) 3. National Park Service (Washington, DC) 4. Indian Health Service (varies) 5. I am open to additional federal agencies not already listed above	

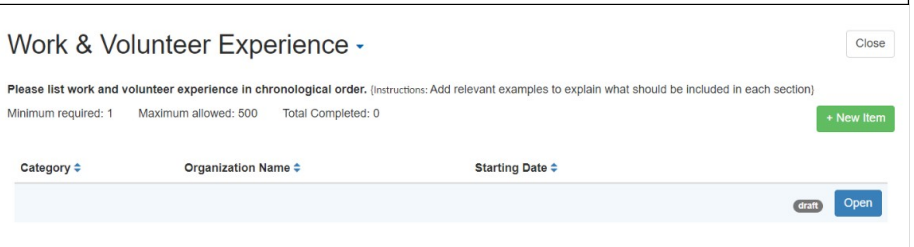
Program	Section	Requested Change	Screenshot
SAF	13.5-a	**Change Type: Response option revision** First [Second | Third] Choice Area: 1. Obesity, nutrition, and physical activity 2. Cancer prevention and control 3. Diabetes 4. Heart disease and stroke prevention 5. Tobacco prevention and cessation 6. 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	 *Note: not possible to show all response options in one screenshot.*

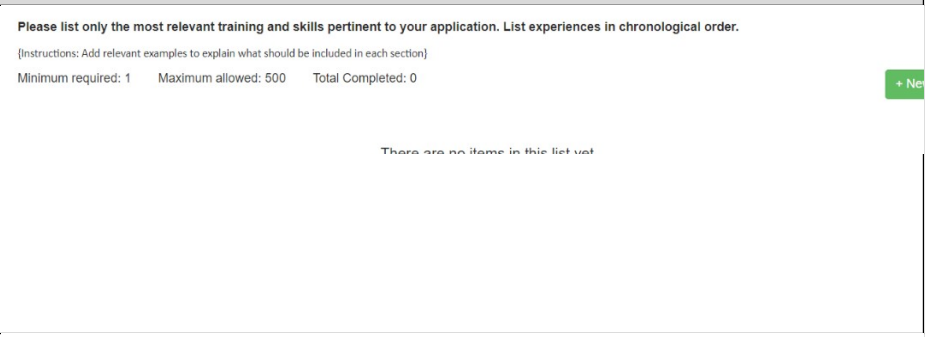
Program	Section	Requested Change	Screenshot
		14. Viral hepatitis 15. Foodborne diseases 16. Waterborne diseases 17. Vectorborne diseases 18. Fungal Diseases 19. One Health and zoonotic disease 20. Arctic Investigations (Alaska) 21. Healthcare-associated infections 22. Quarantine and border health services 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	

Program	Section	Requested Change	Screenshot
		31. State, local, and territorial health 32. Global health 33. COVID-19 34. Other (specify)	
EEP	15	**Change type: Question deletion, instructional text revision** Change item to read (remove questions 3 and 4): Contact Information Confirmation 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. 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)	

Program	Section	Requested Change	Screenshot
EEP	Degree List	**Change Type: Response option revision** Create separate Undergraduate and Graduate Degree lists, with undergraduate list changed to: AB BA BS BS/BA BSc SB ScB Other	 
EEP	Degree List	**Change Type: Response option revision** Create separate Undergraduate and Graduate Degree lists, with graduate list changed to: AM BA DHS	

Program	Section	Requested Change	Screenshot
		DHSc DNSc DPH DPhil DrPH DrS DrSc EdD MA MEd MHS MHSc MHSE MN MPH MPhil MPHTM MPVM	 *Note: not possible to show all response options in one screenshot.*

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** {Instructions: *Add relevant examples to explain what should be included in each section*}	

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