

Fellowship Management System (FMS)

FMS Alumni Tracking Module Draft

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. 0920-0765

Exp. Date 03/31/2023

Public reporting burden of this collection of information is an estimated average of 37 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).

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1. Introduction

The purpose of this document is to list all the data elements collected online from alumni through the Fellowship Management System (FMS). The FMS online alumni directory module is a self-service connection to allow alumni of the Centers for Disease Control and Prevention (CDC) fellowships to update their personal information including current addresses, contact, and education information. The FMS is a robust, flexible framework and is successfully tailored for various fellowships.

The following fellowships currently use the FMS Alumni Directory to collect information from fellowship alumni:

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. Presidential Management Fellowship (PMF)
8. Public Health Associate Program (PHAP)
9. Public Health Informatics Fellowship Program (PHIFP)
10. Science Ambassador Fellowship (SAF)
11. Preventive Medicine Residency and Fellowship (PMR/F)
12. Population Health Training in Place Program (PH-TIPP)

1.1 Document Structure

This document is broken down by the major pages of the FMS Alumni Directory. In this document, each page of the FMS Alumni Directory has sections and some sub-sections. In addition, instructions, login, and registration pages are included. 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 alumni are required to submit this information.
- “No” indicates that the fellowship does not collect this information.
- “Open Response” 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 listed fully in the Appendix

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2. Sign-In & Sign-Up Pages

2.1 Sign-In Page

Table 2.1-a. Sign-In Fields

| Field | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|----------|--------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| Email | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Password | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

Instructional Text:

Technical Support: For technical support to address a system issue or to withdraw your application please submit a System Help Desk Ticket

Government Warning: This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes all devices/storage media attached to this system. This system is provided for Government-authorized use only. Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or criminal penalties. At any time, and for any lawful Government purpose, the government may monitor, record, and audit your system usage and/or intercept, search and seize any communication or data transiting or stored on this system. Therefore, you have no reasonable expectation of privacy. Any communication or data transiting or stored on this system may be disclosed or used for any lawful government purpose.

2.2 Sign-Up Page (For New Users)

Table 2.2-a. Sign-Up Fields

| Field | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|------------------|--------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| Email | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Password | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Confirm Password | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

Instructional Text

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.

Alumni Tracking Module:

Public reporting burden of this collection of information is estimated to average 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). The Privacy Act applies to this information collection.

3 eFMS System Help Desk Ticket

Table 3-a. eFMS System Help Desk Ticket Fields

Instructional Text:

Enter an email address and choose a password to create a new account

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| Field | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| Your Name: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Sign-In Email: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Contact Phone Number: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Fellowship: | See appendix p.43 | Yes | Yes | 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. Reset activity back to "Draft" 8. Withdraw Fellowship Application 9. Other | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| URL where the issue is occurring: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Error code message: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Please describe your issue or need: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Screenshot of error or issue (optional): | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

System Help Desk Instructional Text:

Please Submit help desk tickets for system related (technical) issues or needs only. If you have a fellowship program related question or need please contact the fellowship program directly.

4 Activity Tracking Welcome Page

NOTE: No question content for Activity Tracking Welcome Page, only instructional language:

“Welcome to the [Program] Activity Tracking Portal!”

Please contact the [program] program at [program]@cdc.gov with any questions

TECHINCAL SUPPORT: For technical support to address a system issue, please submit a System Help Desk Ticket

“Create a Profile to Get Started”

5. Alumni Tracking Profile

5.1 General Information

Table 5.1-a. General Information Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| First Name: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Middle Name: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Last Name: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Other Names Used: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Personal Email: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Personal Phone: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Employment Status: | 1. Employed (Full-time) 2. Employed (Part-time) 3. In a training/residency/fellowship program 4. Seeking employment 5. Not currently employed | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes |

5.2 Current Residence

Table 5.2-a. Current Residence Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-------------------------|---------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| Country: | (See Appendix p.43) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| State: | (See Appendix p.43) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| State/Territory: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| City: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

5.3 Fellowship Information

Table 5.3-a. Fellowship Information Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| CDC ID: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | No | Yes | No |
| Alumni Fellowship(s): | 1. EIS 2. LLS 3. PMR/F 4. PH-TIPP 5. FLIGHT 6. PHIFP 7. PE 8. EEP 9. SAF 10. ELI 11. PHAP 12. PMF | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| EIS Class Year: | Open Text Response | Yes | No | No | No | No | No | No | No | No | No | No | No |
| LLS Class Year: | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No | No |
| PMR/F Class Year: | Open Text Response | No | No | No | No | No | Yes | No | No | No | No | No | No |
| FLIGHT Class Year: | Open Text Response | No | No | Yes | No | No | No | No | No | No | No | No | No |
| PH-TIPP Class Year: | Open Text Response | No | No | No | No | No | No | Yes | No | No | No | No | No |
| PHIFP Class Year: | Open Text Response | No | No | No | No | No | No | No | Yes | No | No | No | No |
| PE Class Year: | Open Text Response | No | No | No | No | No | No | No | No | Yes | No | No | No |
| EEP Class Year: | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No | No |
| SAF Class Year: | Open Text Response | No | No | No | No | Yes | No | No | No | No | No | No | No |
| ELI Class Year: | Open Text Response | No | No | No | No | No | No | No | No | No | Yes | No | No |

| | | | | | | | | | | | | | |
|------------------|--------------------|----|----|----|----|----|----|----|----|----|----|-----|-----|
| PHAP Class Year: | Open Text Response | No | No | No | No | No | No | No | No | No | No | Yes | No |
| PMF Class Year: | Open Text Response | No | No | No | No | No | No | No | No | No | No | No | Yes |

6. Post-Fellowship Education, Board Certifications, and Licenses

Table 6.-a. Fellowship Information Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| Completed Undergraduate Degrees: | (See Appendix p.43) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Completed Graduate Degrees: | (See Appendix p.43) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| "Please indicate which of the following types of programs you completed for the graduate degrees listed above": | 1. Accredited U.S. Medical School 2. Non-U.S. Medical School (e.g. MBBS) 3. Accredited Nursing school 4. Accredited Veterinary School 5. Doctoral program (e.g., PhD, EdD, PharmD, SD, etc) 6. Allied health program | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Practicum: | Open Text Response | Yes | Yes | Yes | No | No | Yes | Yes | Yes | Yes | Yes | Yes |
| Completed Residencies: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes |
| Post-doctoral training: | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |
| Active Board Certifications: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes |
| Active Medical Licenses (Please include expiration dates): | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Physician eligible to practice within the U.S.? | 1. Yes | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes |

7.1 Employer Information

Table 7.1-a. Employer Information Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|------------------------------------------|-----------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Is this employer a Public Health Agency? | 1. Yes 2. No | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

| | | | | | | | | | | | | | |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|-----|-----|----|-----|-----|-----|-----|-----|-----|-----|
| Public Health Agency Type: | 1. CDC 2. Federal Government (Other) 3. State 4. Local 5. Territorial 6. Tribal 7. Community-based Organization 8. Indian Health Service area offices 9. University or other academia 10. Private public health organization 11. Non-profit organization 12. Other | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Specify: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| CDC Center/Division/Branch: | (See Appendix p.43) | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Employer Type: | 1. Government - domestic federal 2. Government – domestic state, tribal, local, or territorial 3. Academic 4. Industry (private, non-clinical business) 5. Clinical (hospital or other clinical care) 6. Non-governmental, community, or other organization 7. Other | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Specify: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Organization Name: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Employer Country: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Employer State/Territory: | (See Appendix p.43) | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Employer State/Territory: | Open Text Response | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

Table 7.2-a. Position Information Fields

| Field Name | Values | EIS | LLS | FLIGHT | EOP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|------------------------|--------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Title/Position: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Department: | Open Text | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

| | | | | | | | | | | | | | |
|-----------------------------------------------------------|--------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | Response | | | | | | | | | | | | |
| Employment Start Date: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Are you currently employed with this organization? | 1. Yes 2. No | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Employment End Date: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

Surveys

8.1 Fellowship Alumni Survey

8.1.1 Career Progression

Table 8.1.1-a. Career Progression Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Thinking about your current position, how much of your work is related to any type of public health (including scientific, programmatic, or administrative activities)? This includes traditional and non-traditional public health settings. | 1. None 2. Some 3. Most 4. All 5. Don't Know | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Have you received any of the following within the past [insert timeframe since last survey, i.e., year, two years, five years]? (Check all that apply) | 1. Higher level of responsibility in your job (refers to content of work, not workload) 2. Greater job satisfaction 3. Promotion (e.g., higher position or grade level) 4. None of the above | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

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8.1.2 Leadership Roles

Table 8.1.2-a. Leadership Roles Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Which of the following best describes the supervisory status of your position? | 1. I do not supervise other employees. 2. I provide one or more employees with day-to-day guidance in work projects, but do not have official supervisory responsibility. 3. I supervise one or more employees. 4. I supervise one or more supervisors. 5. I am a senior executive or equivalent (e.g., Chief Executive Officer, Chief Financial Officer, center or agency director). | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| INSTRUCTIONAL TEXT: | | | | | | | | | | | | | |
| In my current position I have a great deal of... How much do you agree or disagree with each of the following statements: | | | | | | | | | | | | | |
| Influence on the policy, operations, or administration of my work unit (e.g., program, department, or branch). | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree nor Disagree 4. Somewhat Agree 5. Strongly Agree | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | No | Yes | Yes |
| Formal decision-making authority for my work unit. | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree nor Disagree 4. Somewhat Agree 5. Strongly Agree | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | No | Yes | Yes |

Table 8.1.2-b. Leadership Roles Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Opportunities to represent my organization in external settings. | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree nor Disagree 4. Somewhat Agree 5. Strongly Agree | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | No | Yes | Yes |
| Cross-sector or interdisciplinary collaboration. | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree nor Disagree 4. Somewhat Agree 5. Strongly Agree | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | No | Yes | Yes |
| Technical responsibility (e.g., subject matter expertise). | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree nor Disagree 4. Somewhat Agree 5. Strongly Agree | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Fiscal responsibility (e.g., budget management). | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree nor Disagree 4. Somewhat Agree 5. Strongly Agree | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | No | Yes | Yes |

Table 8.1.2-c. Leadership Roles Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Which of the following activities have you conducted during the past 12 months? (check all that apply) | 1. Led a program or intervention (i.e., an organized, planned, and usually ongoing effort designed to improve a social problem or improve social conditions) 2. Led a policy development initiative 3. Led a research project (e.g., principal investigator for an IRB-approved study) 4. Obtained new funding for your organization (e.g., via contracts, grants, or other mechanisms) 5. Conducted strategic planning for your organization 6. Authored a publication (e.g., journal article, book chapter) 7. Served on an expert panel or advisory board 8. Served in an official leadership role in a professional organization | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | No | Yes | Yes |

8.1.3 Use of Fellowship Competencies/Skills in Post-Fellowship Positions

Table 8.1.3-a. Use of Fellowship Competencies Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| How relevant to your current position are the skills you learned in your fellowship? | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

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8.1.4 Extent to which fellowship training helped prepare alumni for post-fellowship jobs

Table 8.1.4.-a. Preparing Alumni for Post-Fellowship Job Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Required learning activities (e.g., Core Activities for Learning, Performance Requirements) | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you 5. This was not part of my fellowship | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Peer-to-peer learning | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you 5. This was not part of my fellowship | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Learning from mentors | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you 5. This was not part of my fellowship | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

Table 8.1.4.-b. Preparing Alumni for Post-Fellowship Job Fields

Instructional Text:

To what extent did each of the following parts of your fellowship experience prepare you for your current position?

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| Developing a professional network | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you 5. This was not part of my fellowship | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| [Year 1 survey only] Didactic or classroom-based training | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you 5. This was not part of my fellowship | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | No | Yes | Yes |
| [Year 1 survey only] Overall, to what extent did your fellowship experience prepare you to perform your first job after your fellowship? | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| [Year 1 survey only] Overall, to what extent did your fellowship experience prepare or support your work in your current job after your fellowship? | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed) | No | No | No | No | No | No | No | No | No | Yes | No | No |
| [Year 1 survey only] To what extent did didactic or classroom-based training in your fellowship prepare or support you in your current position? | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed) | No | No | No | No | No | No | No | No | No | Yes | No | No |
| [Year 3 and Year 5 survey] How did your fellowship experience impact your overall career progression? | 1. Negative impact 2. No impact 3. Minimal positive impact 4. Moderate positive impact 5. Substantial positive impact | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

8.1.5 Alumni Engagement

Table 8.1.5.-a. Alumni Engagement Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| How frequently do you interact with individuals or groups from your fellowship network? This could include (but is not limited to) CDC fellowship staff, fellowship alumni, former host site supervisors or colleagues. | 1. Never 2. Rarely – less than a few times/year 3. Sometimes – a few times a year 4. Often – monthly 5. Frequently – weekly or daily | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Have you promoted or marketed the fellowship program in the past year? If so, how? (Check all that apply) | 1. Word of mouth: friends, colleagues, professional organizations, schools 2. Digital Media: social media, news media, website, email or newsletter, internet search 3. Recruiting event: conference or national meeting, info session at school or career fair, webinar 4. Other (please specify) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Based on your experience, where should we be marketing our fellowship opportunities? (Select up to three) | 1. Job sites (Indeed, LinkedIn, Glassdoor, etc.) 2. Social media platforms (Facebook, Instagram, Twitter, etc.) 3. Social media pages (partners, conferences, schools, workplaces, etc.) 4. School events 5. Conferences 6. Professional organizations 7. Newsletter email subscriptions 8. Other (specify) | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Please provide specific examples for your response(s) (e.g., specific job sites or social media platforms): | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Can we contact you about potential recruitment opportunities (career fair, info session, newsletter article, op ed, video clip, etc.)? | 1. Yes 2. No | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP | PMF |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|-----|
| If yes, please specify any schools or professional organizations in which you would be interested in conducting a recruitment event for the fellowship: | Open Text Response | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

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8.2 EEP Alumni Survey

Table 8.2.-a. EEP Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|----|-----|------|
| Which medical or veterinary degree program did you complete? | 1. MD 2. DO 3. VMD 4. DVM | No | No | No | Yes | No | No | No | No | No | No | No |
| What year did you graduate from medical or veterinary school? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| Have you pursued any formal public health training since completing EEP (e.g., graduate degree program in public health, public health certificate program, preventive medicine residency, public health training sessions or courses, etc.)? | 1. Yes 2. No | No | No | No | Yes | No | No | No | No | No | No | No |
| Did you submit an abstract regarding your EEP project to a conference? | 1. Yes 2. No | No | No | No | Yes | No | No | No | No | No | No | No |
| What year? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| What conference? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| Oral Presentation, Poster or Both? | 1. Oral Presentation 2. Poster 3. Both | No | No | No | Yes | No | No | No | No | No | No | No |
| Was the abstract accepted? | 1. Yes 2. No | No | No | No | Yes | No | No | No | No | No | No | No |
| Have you published any public health related scientific work? | 1. Yes 2. No | No | No | No | Yes | No | No | No | No | No | No | No |
| What year? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| What journal? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| Please provide citation: | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| What is your current employment status? | 1. Employed (Full-time) 2. Employed (Part-time) 3. In a training/residency/fellowship program 4. Seeking employment | No | No | No | Yes | No | No | No | No | No | No | No |

Table 8.2.-b. EEP Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Do you currently practice human or veterinary medicine? | 1. Yes 2. No | No | No | No | Yes | No | No | No | No | No | No | No |
| What is your specialty? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| Are you currently completing a residency program or clinical fellowship? | 1. Yes 2. No | No | No | No | Yes | No | No | No | No | No | No | No |
| When do you plan to complete your program? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| What is your specialty? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| INSTRUCTIONAL TEXT: Please indicate your agreement with the following statements: | | | | | | | | | | | | |
| I found my Epidemiology Elective Program experience to have positively influenced my career. | 1. Strongly Disagree 2. Disagree 3. Somewhat Disagree 4. Neither Agree nor Disagree 5. Somewhat Agree 6. Agree 7. Strongly Agree | No | No | No | Yes | No | No | No | No | No | No | No |
| My current work involves the practice of public health. | 1. Strongly Disagree 2. Disagree 3. Somewhat Disagree 4. Neither Agree nor Disagree 5. Somewhat Agree 6. Agree 7. Strongly Agree | No | No | No | Yes | No | No | No | No | No | No | No |

Table 8.2.-b. EEP Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|------------|--------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
|------------|--------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|

| | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|-----|----|----|----|----|----|----|----|
| <p>The activities of my work utilize public health skills, such as those honed during EEP.</p> | <p>1. Strongly Disagree 2. Disagree 3. Somewhat Disagree 4. Neither Agree nor Disagree 5. Somewhat Agree 6. Agree 7. Strongly Agree</p> | No | No | No | Yes | No | No | No | No | No | No | No |
| <p>I plan to devote a greater percent of my time to public health activities within the next 18-24 months.</p> | <p>1. Strongly Disagree 2. Disagree 3. Somewhat Disagree 4. Neither Agree nor Disagree 5. Somewhat Agree 6. Agree 7. Strongly Agree</p> | No | No | No | Yes | No | No | No | No | No | No | No |
| <p>Do you plan to apply to the Epidemic Intelligence Service (EIS)?</p> | <p>1. Yes, I plan to apply to EIS. 2. Yes, I applied to EIS and was accepted 3. I have applied and I plan to reapply in the future. 4. I have applied and do not plan to reapply. 5. No, I do not plan to apply to EIS.</p> | No | No | No | Yes | No | No | No | No | No | No | No |

Table 8.2.c. EEP Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|--------------------------------------|--------------------|-----|-----|--------|-----|-----|-------|---------|-------|----|-----|------|
| In what year do you plan to apply? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| In what year did you apply? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| Were you invited for EIS interviews? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |
| In what year do you plan to reapply? | Open Text Response | No | No | No | Yes | No | No | No | No | No | No | No |

Table 8.2.d. EEP Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|----|-----|------|
| How frequently do you interact with individuals or groups from your fellowship network? This could include (but is not limited to) CDC fellowship staff, fellowship alumni, former host site supervisors, or colleagues. [MULTIPLE CHOICE] | <ol style="list-style-type: none"> Never / we only interact on issues unrelated to public health Rarely – less than a few times a year Sometimes – a few times a year Often – monthly Frequently – weekly or daily | No | No | No | Yes | No | No | No | No | No | No | No |
| How frequently do you work with the following groups since completing EEP? [MATRIX – MULTIPLE CHOICE] [SET UP AS A GRID] - Never / we only interact on issues unrelated to public health - Once a year or less - About once a quarter - About once a month - Every week - Every day | <ol style="list-style-type: none"> Other EEP Alumni Current EEP students Former EEP supervisors and mentors Current or former EEP program staff | No | No | No | Yes | No | No | No | No | No | No | No |

| | | | | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|-----|----|----|----|----|----|----|----|----|----|
| <p>What kinds of activities does your current relationship with the following groups entail? Select all that apply. [SET UP AS A GRID]</p> <p>- Not applicable / I don't interact with this group</p> <p>- Networking</p> <p>- Sharing resources and information</p> <p>- Professional working relationship</p> <p>- EEP recruitment activities</p> <p>- Other</p> | <ol style="list-style-type: none"> 1. Other EEP Alumni 2. Current EEP students 3. Former EEP supervisors and mentors 4. Current or former EEP program staff | No | No | No | Yes | No | No | No | No | No | No | No | No | No |
| <p>How interested are you in seeking further engagement with the following groups? [MATRIX - MULTIPLE CHOICE]</p> <p>- Not at all interested</p> <p>- Somewhat interested</p> <p>- Interested</p> <p>- Extremely interested</p> | <ol style="list-style-type: none"> 1. Other EEP Alumni 2. Current EEP students 3. Former EEP supervisors and mentors 4. Current or former EEP program staff | No | No | No | Yes | No | No | No | No | No | No | No | No | No |
| <p>Were you accepted into the EIS program?</p> <ol style="list-style-type: none"> 1. Yes 2. No | | No | No | No | Yes | No | No | No | No | No | No | No | No | No |
| <p>If so, what year?</p> | <p>Date Field</p> | No | No | No | Yes | No | No | No | No | No | No | No | No | No |

8.3 ELI Alumni Survey

Table 8.3-a. ELI Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Have you continued to create and distribute e-learning? | 1. Yes 2. No | No | No | No | No | No | No | No | No | No | Yes | No |
| On average, how many products have you created since the fellowship? | 1. 1-3 Products 2. 4-6 Products 3. 7-9 Products 4. 10+ Products | No | No | No | No | No | No | No | No | No | Yes | No |
| What channels have you used to distribute e-learning? (Select all that apply) | 1. TRAIN Network or Affiliate 2. Organizational Learning Management System (LMS) 3. Other | No | No | No | No | No | No | No | No | No | Yes | No |

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8.4 LLS Alumni Survey

Table 8.4-a. LLS Alumni Fields

Instructional Text:

Thank you for participating in the LLS Alumni Survey. Your participation is completely voluntary. However, your participation is also a vital way for the LLS program to understand how to better prepare future LLS fellows for a career in public health laboratories.

Your privacy is important to us. Only Epidemiology Workforce Branch staff, including the LLS program, will have access to your responses and results from the survey will be reported in aggregate for decision making by the LLS Program. LLS program staff will use this survey, along with other fellowship data, to improve the LLS program. This Survey is part of a larger LLS program evaluation and aggregate results may be published.

We estimate that it will take approximately 10 minutes to complete this survey. This survey link is unique to you so you will be able to return to the survey to edit or update your responses once you exit.

Please contact lls@cdc.gov if you have any questions regarding this survey.

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Which of the following activities describes what you are doing after LLS? | 1. I do not currently have a job after LLS 2. Additional education or training (are a student or resident) 3. In first position accepted since graduating from LLS 4. Have switched or left roles/jobs at least once since graduating from LLS | No | Yes | No | No | No | No | No | No | No | No | No |
| What is your current supervisory status? | 1. I do not supervise other employees. 2. I provide employees with day-to-day guidance in work projects, but do not have official supervisory responsibility. 3. I supervise other employees. 4. I supervise one or more supervisors. 5. I am a senior executive or equivalent (e.g., CEO, CFO, center or agency director). | No | Yes | No | No | No | No | No | No | No | No | No |
| INSTRUCTIONAL TEXT: How much do you agree or disagree with the following statements? | | | | | | | | | | | | |
| In my current position, I have a great deal of... | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|
| Influence on the policy, operations, or administration of your work unit (e.g., program, department, or branch). | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree Nor Disagree 4. Somewhat Agree 5. Strongly Agree | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Formal decision-making authority for my work unit. | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree Nor Disagree 4. Somewhat Agree 5. Strongly Agree | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Opportunities to represent my organization in external settings. | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree Nor Disagree 4. Somewhat Agree 5. Strongly Agree | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Cross-sector or interdisciplinary collaboration. | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree Nor Disagree 4. Somewhat Agree 5. Strongly Agree | No | Yes | No | No | No | No | No | No | No | No | No | No |

Table 8.4-b. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Technical responsibility (e.g., subject matter expertise). | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree Nor Disagree 4. Somewhat Agree 5. Strongly Agree | No | Yes | No | No | No | No | No | No | No | No | No |
| Fiscal responsibility (e.g., budget management). | 1. Strongly Disagree 2. Somewhat Disagree 3. Neither Agree Nor Disagree 4. Somewhat Agree 5. Strongly Agree | No | Yes | No | No | No | No | No | No | No | No | No |
| Overall, to what extent did your LLS experience prepare you to perform your first job after your | 1. Not at all – Not relevant or did not prepare me 2. A little – Had a small role in preparing me | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|
| fellowship? | (e.g., introduced relevant topics or skills) 2. Somewhat - Had a moderate role in preparing me (e.g., developed skills, but you required additional training) 3. Very much - Had a large role in preparing me (e.g., little or no additional training needed) | | | | | | | | | | | | |
| INSTRUCTIONAL TEXT: How relevant are each of the following skill sets to your current positions? | | | | | | | | | | | | | |
| Leadership and Management Skills | 1. Not at all - Not useful 2. A little - Slightly enhances job performance 3. Somewhat - Desired qualification 4. Very much - Required | No | Yes | No | No | No | No | No | No | No | No | No | No |

Table 8.4-c. LLS Alumni Fields

INSTRUCTIONAL TEXT:

How relevant are each of the following skill sets to your current positions?

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Quality Management Systems | 1. Not at all - Not useful 2. A little - Slightly enhances job performance 3. Somewhat - Desired qualification 4. Very much - Required | No | Yes | No | No | No | No | No | No | No | No | No |
| Laboratory Safety | 1. Not at all - Not useful 2. A little - Slightly enhances job performance 3. Somewhat - Desired qualification 4. Very much - Required | No | Yes | No | No | No | No | No | No | No | No | No |
| Applied Laboratory Research, Investigation, and Surveillance | 1. Not at all - Not useful 2. A little - Slightly enhances job | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | | |
|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|
| | performance 3. Somewhat – Desired qualification 4. Very much – Required | | | | | | | | | | | | |
| Informatics and Bioinformatics | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Communication (oral and written) | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | No | Yes | No | No | No | No | No | No | No | No | No | No |

Table 8.4-d. LLS Alumni Fields

INSTRUCTIONAL TEXT:

How relevant are each of the following skill sets to your current positions?

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Apply leadership and management principles in the policies and processes that accomplish the mission and vision of public health laboratories. | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | No | Yes | No | No | No | No | No | No | No | No | No |
| Support a secure working environment that meets organizational goals, regulatory requirements, and established standards. | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|----|
| Apply ethics and rules of conduct when working in a public health laboratory. | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | No | Yes | No | No | No | No | No | No | No | No | No | No | No |
| Support a quality management system and the processes for providing quality laboratory services. | 1. Not at all – Not useful 2. A little – Slightly enhances job performance 3. Somewhat – Desired qualification 4. Very much – Required | No | Yes | No | No | No | No | No | No | No | No | No | No | No |

Table 8.4-e. LLS Alumni Fields

INSTRUCTIONAL TEXT:

Please indicate the extent to which achieving the LLS Program competencies during your fellowship prepared you to perform your job duties in your current position

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP | | |
|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|----|----|
| Assess risks and hazards within a given laboratory setting. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No | No | No |
| Support a health and safety management system to control workplace hazards. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional | No | Yes | No | No | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|
| | training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | | | | | | | | | | | |
| Support the administrative controls in the laboratory safety program. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No |
| Demonstrate capabilities needed for the testing of samples across a spectrum of technical activities in public health laboratories. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No |

Table 8.4-f. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Conduct a laboratory investigation that includes applied research development, testing, and evaluation designed to advance public health knowledge, methods, and/or practice. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No |
| Support the continuous, systematic collection, | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|
| analysis, and interpretation of health-related data. | 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | | | | | | | | | | | | |
| Support the emergency management and response process for situations that have an impact on laboratory operations. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Apply information science, computer science, and information technology to public health practice, research, and learning. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No | No |

Table 8.4-g. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Interpret biological data using computational techniques, algorithms, and bioinformatics principles. | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity | No | Yes | No | No | No | No | No | No | No | No | No |
| Develop clear and | 1. Not at all – Not relevant or did not prepare you | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|----|----|
| <p>concise information about public health laboratories appropriate to the audience.</p> | <p>2. A little – Had a small role in preparing you (e.g., introduced relevant topics or skills) 3. Somewhat – Had a moderate role in preparing you (e.g., developed skills, but you required additional training in this area) 4. Very much – Had a large role in preparing you (e.g., little or no additional training needed in this area) 5. Did not complete activity</p> | | | | | | | | | | | | | | |
| <p>INSTRUCTIONAL TEXT:</p> <p>To what extent did each of the following parts of your LLS experience prepare you for your current position?</p> | | | | | | | | | | | | | | | |
| <p>Classroom-based training</p> | <p>1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you</p> | No | Yes | No | No | No | No | No | No | No | No | No | No | No | No |
| <p>Peer-to-peer learning</p> | <p>1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you</p> | No | Yes | No | No | No | No | No | No | No | No | No | No | No | No |

Table 8.4-h. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP | | | |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|----|----|----|
| <p>Learning from supervisors/mentors</p> | <p>1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you</p> | No | Yes | No | No | No | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|
| Developing a professional network | 1. Not at all – Not relevant or did not prepare you 2. A little – Had a small role in preparing you 3. Somewhat – Had a moderate role in preparing you 4. Very much – Had a large role in preparing you | No | Yes | No | No | No | No | No | No | No | No | No |
| How do you expect your LLS experience to impact your overall career progression? | 1. Negative impact 2. No impact 3. Minimal positive impact 4. Moderate positive impact 5. Substantial positive impact | No | Yes | No | No | No | No | No | No | No | No | No |
| Please explain your answer to the previous question. | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |
| How else did your LLS experience help prepare you for your career? | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |
| What skills do you wish LLS would have provided more training on? | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |
| What topics did you receive training on in LLS that are less relevant to your career goals? | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |

Table 8.4-i. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|----------------------------------------------------------------------------------------------------------|-------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| INSTRUCTIONAL TEXT: How frequently do you work with the following groups since graduation? | | | | | | | | | | | | |
| Other LLS alumni | 1. Never/We only interact on issues | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|
| | unrelated to public health 2. Once a year or less 3. About once a quarter 4. About once a month 5. Every week 6. Every day | | | | | | | | | | | |
| Current LLS fellows | 1. Never/We only interact on issues unrelated to public health 2. Once a year or less 3. About once a quarter 4. About once a month 5. Every week 6. Every day | No | Yes | No | No | No | No | No | No | No | No | No |
| Epidemiologists | 1. Never/We only interact on issues unrelated to public health 2. Once a year or less 3. About once a quarter 4. About once a month 5. Every week 6. Every day | No | Yes | No | No | No | No | No | No | No | No | No |
| Your former LLS supervisors/mentors | 1. Never/We only interact on issues unrelated to public health 2. Once a year or less 3. About once a quarter 4. About once a month 5. Every week 6. Every day | No | Yes | No | No | No | No | No | No | No | No | No |

Table 8.4-j. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| LLS Program Staff | 1. Never/We only interact on issues unrelated to public health 2. Once a year or less 3. About once a quarter 4. About once a month 5. Every week 6. Every day | No | Yes | No | No | No | No | No | No | No | No | No |
| Please describe any barriers to | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |

| | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|
| collaboration that you've come across with any of the groups in the previous question. | | | | | | | | | | | | |
| Other LLS alumni | 1. Networking 2. Sharing resources / information 3. Collaboration on a project 4. Professional working relationship 5. Other 6. Not Applicable | No | Yes | No | No | No | No | No | No | No | No | No |
| Current LLS fellows | 1. Networking 2. Sharing resources / information 3. Collaboration on a project 4. Professional working relationship 5. Other 6. Not Applicable | No | Yes | No | No | No | No | No | No | No | No | No |
| Epidemiologists | 1. Networking 2. Sharing resources / information 3. Collaboration on a project 4. Professional working relationship 5. Other 6. Not Applicable | No | Yes | No | No | No | No | No | No | No | No | No |

Table 8.4-k. LLS Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|----------------------------------------------------------------------------------------------------------|--------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| INSTRUCTIONAL TEXT: How frequently do you work with the following groups since graduation? | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|----|----|----|----|----|----|----|----|----|
| Your former LLS supervisors/mentors | 1. Networking 2. Sharing resources / information 3. Collaboration on a project 4. Professional working relationship 5. Other 6. Not Applicable | No | Yes | No | No | No | No | No | No | No | No | No | No |
| LLS Program Staff | 1. Networking 2. Sharing resources / information 3. Collaboration on a project 4. Professional working relationship 5. Other 6. Not Applicable | No | Yes | No | No | No | No | No | No | No | No | No | No |
| INSTRUCTIONAL TEXT: How valuable has collaboration pos-LLS graduation been with the following groups? | | | | | | | | | | | | | |
| Other LLS alumni | 1. Not at all valuable 2. Somewhat valuable 3. Valuable 4. Extremely valuable 5. Not applicable | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Current LLS fellows | 1. Not at all valuable 2. Somewhat valuable 3. Valuable 4. Extremely valuable 5. Not applicable | No | Yes | No | No | No | No | No | No | No | No | No | No |
| Epidemiologists | 1. Not at all valuable 2. Somewhat valuable 3. Valuable 4. Extremely valuable 5. Not applicable | No | Yes | No | No | No | No | No | No | No | No | No | No |

Table 8.4-I. LLS Alumni Fields

INSTRUCTIONAL TEXT:

How valuable has collaboration pos-LLS graduation been with the following groups?

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/ F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-----------|---------|-------|----|-----|------|
| Your former LLS supervisors/mentors | 1. Not at all valuable 2. Somewhat valuable 3. Valuable 4. Extremely valuable 5. Not applicable | No | Yes | No | No | No | No | No | No | No | No | No |
| LLS Program Staff | 1. Not at all valuable 2. Somewhat valuable 3. Valuable 4. Extremely valuable 5. Not applicable | No | Yes | No | No | No | No | No | No | No | No | No |
| INSTRUCTIONAL TEXT: How interested are you in seeking further engagement with the following groups? | | | | | | | | | | | | |
| Other LLS alumni | 1. Not at all interested 2. Somewhat interested 3. Interested 4. Extremely interested | No | Yes | No | No | No | No | No | No | No | No | No |
| Current LLS fellows | 1. Not at all interested 2. Somewhat interested 3. Interested 4. Extremely interested | No | Yes | No | No | No | No | No | No | No | No | No |
| Epidemiologists | 1. Not at all interested 2. Somewhat interested 3. Interested 4. Extremely interested | No | Yes | No | No | No | No | No | No | No | No | No |

Table 8.4-m. LLS Alumni Fields

INSTRUCTIONAL TEXT:

How interested are you in seeking further engagement with the following groups?

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|----|-----|------|
| Your former LLS supervisors/mentors | 1. Not at all interested 2. Somewhat interested 3. Interested 4. Extremely interested | No | Yes | No | No | No | No | No | No | No | No | No |
| LLS Program Staff | 1. Not at all interested 2. Somewhat interested 3. Interested 4. Extremely interested | No | Yes | No | No | No | No | No | No | No | No | No |
| Do you have any suggestions to improve the LLS program based on your needs upon graduation and in your new position? | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |
| How can the LLS Program better support LLS alumni engagement? | Open Text Response | No | Yes | No | No | No | No | No | No | No | No | No |

8.5 SAF Alumni Survey

Table 8.5-a SAF Alumni Fields

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|----|-----|------|
| Have you continued to teach public health content in your classroom or 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)? | 1. Yes 2. No | No | No | No | No | Yes | No | No | No | No | No | No |
| Estimate how many students you have taught public health content to as part of your curriculum or elective course since completing the fellowship. | Open Text Response | No | No | No | No | Yes | No | No | No | No | No | No |
| Estimate how many students you coached through extracurricular clubs or programs at your school related to public health since completing the fellowship. | Open Text Response | No | No | No | No | Yes | No | No | No | No | No | No |
| Have you continued to promote the use of public health in a STEM curriculum within your network? | 1. Yes 2. No | No | No | No | No | Yes | No | No | No | No | No | No |
| Estimate how many teachers/colleagues you have trained/introduced to teaching public health content as part of their STEM curriculum since completing the fellowship. | Open Text Response | No | No | No | No | Yes | No | No | No | No | No | No |
| Estimate how many teachers/colleagues you have recommended the CDC Science Ambassador Fellowship to since completing the fellowship. | Open Text Response | No | No | No | No | Yes | No | No | No | No | No | No |
| How frequently do you interact with individuals or groups from your fellowship network? This could include (but is not limited to) CDC fellowship staff, fellowship alumni, former host site supervisors, or colleagues. [MULTIPLE CHOICE] | 1. Never / we only interact on issues unrelated to public health 2. Rarely - less than a few times a year 3. Sometimes - a few times a year 4. Often - monthly 5. Frequently - weekly or daily | No | No | No | No | Yes | No | No | No | No | No | No |

| | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|----|-----|----|----|----|----|----|----|
| <p>How frequently do you work with the following groups since completing EEP? [MATRIX – MULTIPLE CHOICE] [SET UP AS A GRID]</p> <ul style="list-style-type: none"> - Never / we only interact on issues unrelated to public health - Once a year or less - About once a quarter - About once a month - Every week - Every day | <ol style="list-style-type: none"> 1. Other SAF Alumni 2. Current SAFs 3. Former SAF partners/collaborators 4. Current or former SAF program staff | No | No | No | No | Yes | No | No | No | No | No | No |
| <p>What kinds of activities does your current relationship with the following groups entail? Select all that apply. [SET UP AS A GRID]</p> <ul style="list-style-type: none"> - Not applicable / I don't interact with this group - Networking - Sharing resources and information - Professional working relationship - SAF recruitment activities - Other | <ol style="list-style-type: none"> 1. Other SAF Alumni 2. Current SAFs 3. Former SAF partners/collaborators 4. Current or former SAF program staff | No | No | No | No | Yes | No | No | No | No | No | No |
| <p>How interested are you in seeking further engagement with the following groups? [MATRIX – MULTIPLE CHOICE]</p> <ul style="list-style-type: none"> - Not at all interested - Somewhat interested - Interested | <ol style="list-style-type: none"> 1. Other SAF Alumni 2. Current SAFs 3. Former SAF partners/collaborators 4. Current or former SAF program staff | No | No | No | No | Yes | No | No | No | No | No | No |
| <p>Have you co-taught any SAF events? For example, at a conference, regional training, or virtual training.</p> | <ol style="list-style-type: none"> 1. Yes 2. No | No | No | No | No | Yes | No | No | No | No | No | No |
| <p>Have you participated in any SAF events? For example, at a conference, regional training, or virtual training.</p> | <ol style="list-style-type: none"> 1. Yes 2. No | No | No | No | No | Yes | No | No | No | No | No | No |

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|-------------------------------------------|-----------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| What is your race? (select all the apply) | 1. American Indian or | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

| | | | | | | | | | | | | | |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | Alaska Native 2. Asian 3. Black or African American 4. Native Hawaiian or Other Pacific Islander 5. White | | | | | | | | | | | | |
| What is your ethnicity? | 1. Hispanic or Latino 2. Not Hispanic or Latino | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

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8.6 Alumni Survey Email

INSTRUCTIONAL TEXT:

You are being asked to participate in this survey because of your participation in the Centers for Disease Control and Prevention (CDC) [Insert Fellowship Program Here] program. The purposes of this survey are 1) to learn what our alumni are doing and 2) use that information to improve fellowship training programs.

Your participation in the survey is entirely voluntary and you may skip any questions you do not want to answer. Your responses are confidential and will be kept secure. Your privacy will be protected to the extent allowed by federal law.

This survey will take approximately 10-15 minutes to complete. If you have any questions, please contact [insert eFMS contact info here]

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8.7 Alumni Survey My Demographics

Table 8.7. Alumni Survey Fields My Demographics

| Field Name | Values | EIS | LLS | FLIGHT | EEP | SAF | PMR/F | PH-TIPP | PHIFP | PE | ELI | PHAP |
|--------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|--------|-----|-----|-------|---------|-------|-----|-----|------|
| What is your race? (select all the apply) | 1. American Indian or Alaska Native 2. Asian 3. Black or African American 4. Native Hawaiian or Other Pacific Islander 5. White | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| What is your ethnicity? | 1. Hispanic or Latino 2. Not Hispanic or Latino | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

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Appendix

Appendix of Lookup Tables

| Lookup Table Name | Application Locations | Values 1 | Values 2 | Values 3 | Values 4 | Values 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) Epidemiology 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) | | | | |
| Country Lookup | 5.2 Current | United States | Canary Islands (Spain) | French Guiana (France) | Liberia | Paraguay |

| | | | | | | |
|--|---------------------------|---------------------|-------------------------------------|---------------------------|----------------------------|------------------------------------|
| | Residence | Afghanistan | Cape Verde | French Polynesia (France) | Latvia | Other |
| | | Albania | Cayman Islands (U.K.) | Gabon | Libya | Peru |
| | | Algeria | Central African Republic | Gambia, The | Lebanon | Pakistan |
| | | Andorra | China | Georgia | Liechtenstein | Philippines |
| | | Angola | Chad | Germany | Lesotho | Palau |
| | | Anguilla (U.K.) | Christmas Island (Australia) | Ghana | Lithuania | Pitcairn Islands (U.K.) |
| | | Antigua and Barbuda | Chile | Gibraltar (U.K.) | Luxembourg | Poland |
| | | Argentina | Cocos (Keeling) Islands (Australia) | Greece | Macau SAR (China) | Portugal |
| | | Armenia | Colombia | Guinea | Macedonia | Qatar |
| | | Aruba | Comoros | Greenland (Denmark) | Madagascar | Reunion (France) |
| | | Australia | Congo, Democratic Republic of the | Grenada | Madeira Islands (Portugal) | Romania |
| | | Austria | Congo, Republic of the | Guinea-Bissau | Malawi | Russia |
| | | Azerbaijan | Cook Islands (New Zealand) | Guadeloupe | Malaysia | Rwanda |
| | | Azores | Costa Rica | Guyana | Martinique (France) | Saint Lucia |
| | | Bahamas, The | Cote d'Ivoire | Guatemala | Maldives | Saint Helena (U.K.) |
| | | Bahrain | Djibouti | Haiti | Mauritania | Saint Pierre and Miquelon (France) |
| | | Bangladesh | Croatia | Honduras | Mali | Saint Kitts and Nevis |
| | | Barbados | Cuba | Hong Kong SAR (China) | Mauritius | Saint Vincent and the Grenadines |
| | | Belarus | Dominica | Hungary | Malta | Samoa |
| | | Belgium | Cyprus | Iceland | Mayotte (France) | San Marino |
| | | Belize | Dominican Republic | India | Marshall Islands | San Marino |
| | | Benin | Czech Republic | Indonesia | Mexico | Sao Tome and Principe |
| | | Bermuda (U.K.) | Easter Island (Chile) | Iran | Moldova | Saudi Arabia |
| | | Bhutan | Denmark | Jamaica | Monaco | Senegal |
| | | Bolivia | | Iraq | Mongolia | Serbia |

| | | | | | | |
|--|--|---------------------------------------|-----------------------------|--------------|---------------------------------|--------------------------|
| | | Bosnia and Herzegovina | Ecuador | Japan | Montenegro | Seychelles |
| | | Botswana | Egypt | Ireland | Montserrat (U.K.) | Somalia |
| | | Brazil | El Salvador | Jordan | Morocco | Sierra Leone |
| | | British Indian Ocean Territory (U.K.) | Equatorial Guinea | Israel | Mozambique | Singapore |
| | | British Virgin Islands | Eritrea | Kazakhstan | Netherlands Antilles | South Africa |
| | | Brunei | Estonia | Italy | Namibia | Slovakia |
| | | Bulgaria | Ethiopia | Kenya | Nauru | Spain |
| | | Burkina Faso | Falkland Islands (Malvinas) | Kiribati | Netherlands, The | Slovenia |
| | | Burma (Myanmar) | Finland | Korea, North | Nepal | Sri Lanka |
| | | Burundi | Falkland Islands (U.K.) | Korea, South | New Caledonia (France) | Solomon Islands |
| | | Cambodia | Faroe Islands (Denmark) | Kosovo | New Zealand | Sudan |
| | | Cameroon | France | Kuwait | Nicaragua | Suriname |
| | | Canada | Fiji | Kyrgyzstan | Niger | Swaziland |
| | | | | Laos | Nigeria | Sweden |
| | | | | | Niue (New Zealand) | Switzerland |
| | | | | | Northfolk Island (Australia) | Syria |
| | | | | | Northern Mariana Islands (U.S.) | Taiwan |
| | | | | | Panama | Tajikistan |
| | | | | | Norway | Tanzania |
| | | | | | Papua New Guinea | Togo |
| | | | | | Oman | Thailand |
| | | | | | | Timor-Leste (East Timor) |
| | | | | | | Tokelau (New Zealand) |
| | | | | | | Tonga |
| | | | | | | Trinidad and Tobago |

| | | | | | | |
|-------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | | | Tunisia Turkey Turkmenistan Turks and Caicos Islands (U.K.) Tuvalu Vanuatu Uganda Venezuela Ukraine Vietnam United Arab Emirates Western Sahara United Kingdom Yemen Uruguay Zambia Uzbekistan Zimbabwe |
| State/Territory Lookup | 5.2 Current Residence 7.1 Employer Information | Alabama Alaska Arizona Arkansas California Colorado | Nevada New Hampshire New Jersey New Mexico New York North Carolina | | | |

| | | | | | | |
|-------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------|
| | | Connecticut Delaware Washington, DC Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska | North Dakota Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin Wyoming Puerto Rico Pacific Islands U.S. Virgin Islands Guam Northern Mariana Islands | | | |
| Center/Division/Branch | 7.1 Employer | NIOSH / Office of the Director / Administrative Svcs Branch (Cincinnati) | NCHS / Division of Health Interview Statistics / Data Analysis & Quality Assurance | NIOSH / Pittsburgh Mining Research Division / Fires and Explosions Branch | Research and Evaluation Branch NCEH / Division of Laboratory | CPR / Division of Select Agents and Toxins / Operations Branch |

| Lookup | Information | | | | | |
|--------|-----------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| | | NIOSH / Office of the Director / Administrative Svcs Branch (Morgantown) | Branch | NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Food Safety Office | Science / Inorganic and radiation analytical toxicology branch | NCEZID / Office of the Director / Office of the Director |
| | | NIOSH / Office of the Director / Administrative Svcs Branch (Spokane) | CSELS / Division of Scientific Education and Professional Development / Education and Training Se... | NCEZID / Division of Global Migration and Quarantine / Geographic Medicine and Health Promotion B... | CSELS / Division of Laboratory Systems / Laboratory Training and Services Branch | NCEH / Division of Laboratory Science / Organic analytical toxicology branch |
| | | NIOSH / Office of the Director / Administrative Svcs Branch (Pittsburgh) | NCHHSTP / Division of Tuberculosis Elimination / Data Management and Statistics Branch | NCHS / Office of Analysis & Epidemiology / Health Promotion Statistics Branch | NCEH / Division of Environmental Health Science and Practice / Lead Poisoning Prevention and Envi... | NCHS / Office of the Director / Office of the Director |
| | | NCHS / Office of Analysis & Epidemiology / Aging & Chronic Disease Statistics Branch | NIOSH / Pittsburgh Mining Research Division / Electrical & Mechanical Systems Safety Branch | ATSDR / Division of Toxicology and Human Health Sciences / Geospatial Research, Analysis, and Ser... | CSELS / Division of Public Health Information and Dissemination / Library Science Branch | NIOSH / Division of Applied Research & Technology / Organizational Science & Human Factors Branch |
| | | NIOSH / Health Effects Laboratory Division / Allergy & Clinical Immunology Branch | NCHS / Division of Health Interview Statistics / Data Production & Systems Branch | CGH / Division of Global Health Protection / Global Non-communicable Disease Branch | CPR / Division of Strategic National Stockpile / Logistics Branch | NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Outbreak Response and Pre... |
| | | NCHS / Division of Health Care Statistics / Ambulatory and Hospital Care Statistics Branch | CPR / Division of Emergency Operations / Emergency and Risk Communications Branch | NCCDPHP / Office on Smoking and Health / Global Tobacco Control Branch | CPR / Division of Emergency Operations / Logistics Support Branch | CGH / Division of Global Health Protection / Overseas Business Operations Branch |
| | | NIOSH / Division of Safety Research / Analysis & Field Branch | NCEZID / Division of Vector-Borne Diseases / Dengue Branch | NCHHSTP / Division of Sexually Transmitted Disease Prevention / Health Services Research and Eval... | NCHS / Division of Health Care Statistics / Long-Term Care Statistics Branch | CGH / Division of Global HIV and TB / Overseas Strategy and Management Branch |
| | | NCHS / Division of Health & Nutrition Examination Surveys / Analysis Branch | NCEH / Division of Environmental Health Science and Practice / Emergency Management, Radiation, a... | CGH / Division of Global HIV and TB / Global Tuberculosis Branch | CGH / Division of Parasitic Diseases and Malaria / Malaria Branch | CGH / Division of Parasitic Diseases and Malaria / Parasitic Diseases Branch |
| | | NCHS / Office of Analysis & Epidemiology / Analytic Studies Branch | NCBDDD / Division of Congenital and Developmental Disorders / Developmental Disabilities Branch | NCIPC / Division of Unintentional Injury Prevention / Health Systems and Trauma Systems Branch | NIOSH / Office of the Director / Management Systems Branch | CSELS / Division of Health Informatics and Surveillance Systems / Partnerships and Evaluation Branch |
| | | NCEZID / Division of Scientific Resources / Animal Resources Branch | NCEZID / Division of Preparedness and Emerging Infections / Emergency Preparedness and Response B... | NIOSH / Pittsburgh Mining Research Division / Ground Control Branch | CGH / Division of Global HIV and TB / Maternal and Child Health Branch | NIOSH / Health Effects Laboratory Division / Pathology & Physiological Research Branch |
| | | NCCDPHP / Division for Heart Disease and Stroke Prevention / Applied Research and Evaluation Branch | NCBDDD / Division of Human Development and Disability / Disability and Health Branch | NCEH / Division of Emergency and Environmental Health Services / Healthy Community Design Initiative | NCCDPHP / Division of Reproductive Health / Maternal and Infant Health Branch | NCCDPHP / Division of Nutrition, Physical Activity, & Obesity / Physical Activity and Health Branch |
| | | NCCDPHP / Division of Population Health / Applied Research and Translation Branch | CGH / Division of Global | NIOSH / Division of Surveillance, Hazard | NCIRD / Division of Bacterial | CPR / Division of Strategic National Stockpile / Planning |

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| | | <p>NCCDHP / Division of Reproductive Health / Applied Sciences Branch</p> <p>NCEZID / Division of Vector-Borne Diseases / Arboviral Diseases Branch</p> <p>NCEZID / Division of Preparedness and Emerging Infections / Arctic Investigations Program</p> <p>NCCDHP / Division of Population Health / Arthritis, Epilepsy and Well-Being Branch</p> <p>NCIRD / Immunization Services Division / Assessment Branch</p> <p>NCEH / Division of Environmental Health Science and Practice / Asthma and Community Health Branch</p> <p>NCEZID / Division of Vector-Borne Diseases / Bacterial Diseases Branch</p> <p>NCEZID / Division of High Consequence Pathogens & Pathology / Bacterial Special Pathogens Branch</p> <p>NCHHSTP / Division of HIV/AIDS Prevention Surveillance & Epidemiology / Behavioral And Clinical S...</p> <p>NIOSH / Division of Applied Research & Technology / Biomonitoring & Health Assessment Branch</p> <p>NIOSH / Health Effects Laboratory Division / Biostatistics & Epidemiology Branch</p> <p>NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Biostatistics and Informa...</p> | <p>Health Protection / Emergency Response and Recovery Branch</p> <p>NIOSH / Division of Compensation Analysis & Support / Division of Compensation Analysis & Support</p> <p>NCEH / Division of Laboratory Science / Emergency response branch</p> <p>NCCDHP / Division of Oral Health / Division of Oral Health</p> <p>ATSDR / Division of Toxicology and Human Health Sciences / Emergency Response Program</p> <p>NIOSH / Health Effects Laboratory Division / Engineering & Control Branch</p> <p>NIOSH / Division of Applied Research & Technology / Engineering & Physical Hazards Branch</p> <p>NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Enteric Diseases Epidemio...</p> <p>NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Enteric Diseases Laborato...</p> <p>CGH / Division of Parasitic Diseases and Malaria / Entomology Branch</p> <p>ATSDR / Division of Toxicology and Human Health Sciences / Environmental Epidemiology</p> | <p>Evaluations & Field Studies / Hazard Evaluations & Techn...</p> <p>NCEH / Division of Emergency and Environmental Health Services / Healthy Homes and Lead Poisoning...</p> <p>NIOSH / Health Effects Laboratory Division / Health Communication Research Branch</p> <p>NCBDDD / Division of Blood Disorders / Hemostasis Laboratory Branch</p> <p>NCCDHP / Office of the Director / Health Communication Science Office</p> <p>NCHHSTP / Office of the Director / Health Communication Science Office</p> <p>CGH / Division of Global HIV and TB / HIV Care and Treatment Branch</p> <p>NCBDDD / Office of the Director / Health Communication Science Office</p> <p>NCHHSTP / Division of HIV/AIDS Prevention Surveillance & Epidemiology / HIV Incidence and Case Su...</p> <p>NIOSH / Pittsburgh Mining Research Division / Health Communication, Surveillance, Research Suppor...</p> <p>CGH / Division of Global HIV and TB / HIV Prevention Branch</p> <p>NCCDHP / Office on Smoking and Health / Health Communications Branch</p> | <p>Branch / Meningitis and Vaccine Preventable Diseases Branch</p> <p>CGH / Division of Global HIV and TB / Monitoring, Evaluation, and Data Analysis Branch</p> <p>NIOSH / Office of the Director / Office of Extramural Coordination & Special Projects</p> <p>NCHS / Division of Vital Statistics / Mortality Statistics Branch</p> <p>NCEZID / Division of Foodborne, Waterborne and Environmental Diseases / Mycotic Diseases Branch</p> <p>NCEH / Office of the Director / Office of Financial, Administrative, and Information Services</p> <p>NCEH / Division of Laboratory Science / Newborn screening and molecular biology branch</p> <p>NCIRD / Office of the Director / Office of Health Communication Science</p> <p>NCCDHP / Division of Nutrition, Physical Activity, & Obesity / Nutrition Branch</p> <p>NCHHSTP / Office of the Director / Office of Health Equity</p> <p>NCEH / Division of Laboratory Science / Nutritional biomarkers branch</p> <p>NCIRD / Office of the Director / Office of Informatics</p> <p>NCCDHP / Division of</p> | <p>and Analysis Branch</p> <p>NCHS / Division of Health & Nutrition Examination Surveys / Planning Branch</p> <p>CPR / Division of Emergency Operations / Plans, Training, Exercise and Evaluation Branch</p> <p>NCIPC / Division of Violence Prevention / Prevention Practice and Translation Branch</p> <p>NCBDDD / Office of the Director / Policy, Planning, and Evaluation Team</p> <p>NCHHSTP / Division of HIV/AIDS Prevention-Intervention & Support / Prevention Program Branch</p> <p>NCIRD / Division of Viral Diseases / Polio and Picornavirus Laboratory Branch</p> <p>NCBDDD / Division of Congenital and Developmental Disorders / Prevention Research and Translation...</p> <p>CGH / Global Immunization Division / Polio Eradication</p> <p>NCCDHP / Division of Population Health / Population Health Surveillance Branch</p> <p>NCHHSTP / Division of HIV/AIDS Prevention-Intervention & Support / Prevention Research Branch</p> <p>CSELS / Division of Scientific Education and Professional Development / Population Health Workfor...</p> |
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& Public Health Data Standards Staff / Classification & Public Health Data ...</p> | <p>Branch</p> <p>NCCDHP / Division of Population Health / Epidemiology and Surveillance Branch</p> <p>NCEH / Division of Emergency and Environmental Health Services / Environmental Health Services Br...</p> <p>ATSDR / Division of Toxicology and Human Health Sciences / Environmental Health Surveillance Branch</p> <p>NCHHSTP / Division of Viral Hepatitis / Epidemiology and Surveillance Branch</p> <p>ATSDR / Division of Toxicology and Human Health Sciences / Environmental Medicine Branch</p> <p>NCHHSTP / Division of HIV/AIDS Prevention Surveillance & Epidemiology / Epidemiology Branch</p> <p>NCEH / Division of Emergency and Environmental Health Services / Environmental Public Health Read...</p> <p>NCCDHP / Office on Smoking and Health / Epidemiology Branch</p> <p>ATSDR / Division of Toxicology and Human Health Sciences / Environmental Toxicology Branch</p> <p>NCEZID / Division of Healthcare Quality</p> | <p>NCIPC / Division of Unintentional Injury Prevention / Home, Recreation, and Transportation Branch</p> <p>CGH / Division of Global HIV and TB / Health Informatics, Data Management, and Statistics Branch</p> <p>NIOSH / Pittsburgh Mining Research Division / Human Factors Branch</p> <p>NCEZID / Division of Global Migration and Quarantine / Immigrant, Refugee, and Migrant Health Branch</p> <p>NCIRD / Immunization Services Division / Immunization Information System Support Branch</p> <p>NCEZID / Division of Healthcare Quality Promotion / Immunization Safety Office</p> <p>CGH / Global Immunization Division / Immunization System Branch</p> <p>NCIRD / Influenza Division / Immunology and Pathogenesis Branch</p> <p>NIOSH / Division of Surveillance, Hazard Evaluations & Field Studies / Industrywide Studies Branch</p> <p>NCHS / Office of Analysis & Epidemiology / Infant, Child, & Women's Health Statistics Branch</p> <p>NCEZID / Division of High Consequence Pathogens & Pathology / Infectious Diseases Pathology Branch</p> <p>NCIRD / Office of the Director</p> | <p>Nutrition, Physical Activity, & Obesity / Obesity Prevention and Control Br...</p> <p>NCIRD / Office of the Director / Office of Laboratory Science</p> <p>NIOSH / Office of the Director / Office of Administrative & Management Svcs</p> <p>NCIRD / Office of the Director / Office of Management and Operations</p> <p>NCEH / Office of the Director / Office of Communication</p> <p>NCHHSTP / Office of the Director / Office of Management and Program Support</p> <p>NCIPC / Office of the Director / Office of Communication</p> <p>NCHS / Office of Planning Budget and Legislation / Office of Planning Budget and Legislation</p> <p>NCIRD / Office of the Director / Office of Policy</p> <p>NCIPC / Office of the Director / Office of Policy and Partnerships</p> <p>NCEH / Office of the Director / Office of Policy, Planning, and Evaluation</p> <p>NCIPC / Office of the Director / Office of Program Management and Operations</p> <p>NCHHSTP / Office of the Director / Office of Program Planning & Policy</p> | <p>NCEZID / Division of High Consequence Pathogens & Pathology / Prion & Public Health Office</p> <p>NCEZID / Division of High Consequence Pathogens & Pathology / Poxvirus and Rabies Branch</p> <p>NCHHSTP / Office of the Director / Program and Performance Improvement Office</p> <p>NCIPC / Division of Analysis, Research, and Practice Integration / Practice Integration and Evalu...</p> <p>CGH / Division of Global HIV and TB / Program Budget and Extramural Management Branch</p> <p>NCEZID / Division of Healthcare Quality Promotion / Prevention & Response Branch</p> <p>NCCDHP / Division of Nutrition, Physical Activity, & Obesity / Program Development and Evaluatio...</p> <p>NCHHSTP / Division of Viral Hepatitis / Prevention Branch</p> <p>NCCDHP / Division for Heart Disease and Stroke Prevention / Program Development and Services Branch</p> <p>NCHHSTP / Division of HIV/AIDS Prevention-Intervention & Support / Prevention Communications Branch</p> <p>NCHHSTP / Division of Adolescent and School Health / Program</p> |
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| | | <p>NCEZID / Division of Healthcare Quality Promotion / Clinical & Environmental Microbiology Branch</p> <p>NCEH / Division of Laboratory Science / Clinical chemistry branch</p> <p>NCHHSTP / Division of Tuberculosis Elimination / Clinical Research Branch</p> <p>NCHS / Division of Research & Methodology / Collaborating Center for Questionnaire Design & Evalu...</p> <p>NCHS / Division of Research & Methodology / Collaborating Center for Statistical Research & Surve...</p> <p>NCIRD / Immunization Services Division / Communication and Education Branch</p> <p>NCHHSTP / Division of Tuberculosis Elimination / Communications, Education, and Behavioral Studie...</p> <p>CSELS / Division of Public Health Information and Dissemination / Community Guide Branch</p> <p>NCCDPHP / Division of Cancer Prevention and Control / Comprehensive Cancer Control Branch</p> <p>ATSDR / Division of Toxicology and Human Health Sciences / Computational Toxicology and Methods D...</p> <p>NIOSH / Education & Information Division / Document Development Branch</p> <p>NIOSH / National Personal Protective Technology Laboratory / Conformity Verification &</p> | <p>Promotion / Epidemiology Research and Innovations Branch</p> <p>NCCDPHP / Division of Cancer Prevention and Control / Epidemiology and Applied Research Branch</p> <p>CSELS / Division of Scientific Education and Professional Development / Epidemiology Workforce Br...</p> <p>NCIRD / Influenza Division / Epidemiology and Prevention Branch</p> <p>CGH / Division of Global Health Protection / Epidemiology, Informatics, Surveillance and Lab Branch</p> <p>NCCDPHP / Division of Diabetes Translation / Epidemiology and Statistics Branch</p> <p>NIOSH / National Personal Protective Technology Laboratory / Evaluation & Testing Branch</p> <p>NCHHSTP / Division of Sexually Transmitted Disease Prevention / Epidemiology and Statistics Branch</p> <p>NIOSH / Health Effects Laboratory Division / Exposure Assessment Branch</p> <p>NCCDPHP / Division for Heart Disease and Stroke Prevention / Epidemiology and Surveillance Branch</p> <p>NCHHSTP / Division of Sexually Transmitted Disease Prevention / Field Services Branch</p> <p>NCBDDD / Division of Blood</p> | <p>/ Influenza Coordination Unit</p> <p>CGH / Division of Global HIV and TB / International Laboratory Branch</p> <p>NCHS / Division of Health & Nutrition Examination Surveys / Informatics Branch</p> <p>CSELS / Division of Public Health Information and Dissemination / Informatics Innovation Unit</p> <p>NCHHSTP / Division of HIV/AIDS Prevention Surveillance & Epidemiology / Laboratory Branch</p> <p>NCHHSTP / Office of the Director / Informatics Office</p> <p>NCHHSTP / Division of Tuberculosis Elimination / Laboratory Branch</p> <p>NCHS / Office of Information Services / Information Design & Publishing Staff</p> <p>NCHHSTP / Division of Viral Hepatitis / Laboratory Branch</p> <p>NCHS / Office of Information Services / Information Dissemination Staff</p> <p>NIOSH / Education & Information Division / Information Resources and Dissemination Branch</p> <p>CSELS / Division of Laboratory Systems / Laboratory Practice Standards Branch</p> <p>NCEZID / Division of Preparedness and Emerging Infections / Laboratory Preparedness and Response ...</p> | <p>Coordination</p> <p>CSELS / Division of Public Health Information and Dissemination / Office of Public Health Genomics</p> <p>NCCDPHP / Office of the Director / Office of Public Health Practice</p> <p>NCIRD / Office of the Director / Office of Science and Integrated Programs</p> <p>NCHHSTP / Office of the Director / Office of the Associate Director for Laboratory Science</p> <p>NCHHSTP / Office of the Director / Office of the Associate Director for Science</p> <p>NCIPC / Office of the Director / Office of the Associate Director for Science</p> <p>NCHS / Office of the Director / Office of the Director</p> <p>NCHS / Division of Health & Nutrition Examination Surveys / Office of the Director</p> <p>NCHS / Division of Health Care Statistics / Office of the Director</p> <p>CPR / Office of the Director / Office of the Director</p> <p>NCHS / Division of Health Interview Statistics / Office of the Director</p> <p>NCEZID / Division of Healthcare Quality Promotion / Office of the Director/International</p> | <p>Development and Services Branch</p> <p>NCHHSTP / Division of HIV/AIDS Prevention- Intervention & Support / Program Evaluation Branch</p> <p>NCCDPHP / Division of Diabetes Translation / Program Implementation Branch</p> <p>CPR / Division of Select Agents and Toxins / Program Management and Operations Branch</p> <p>NCIRD / Immunization Services Division / Program Operations Branch</p> <p>NCCDPHP / Division of Cancer Prevention and Control / Program Services Branch</p> <p>CPR / Division of Select Agents and Toxins / Program Services Branch</p> <p>CPR / Division of State and Local Readiness / Program Services Branch</p> <p>NCCDPHP / Office of the Director / Program Services Branch</p> <p>NCCDPHP / Office on Smoking and Health / Program Services Branch</p> <p>NCHHSTP / Division of Sexually Transmitted Disease Prevention / Programs Development and Quality ...</p> <p>NIOSH / Division of Safety Research / Protective Technology Branch</p> |
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| | | <p>Standards ...</p> <p>NCCDPHP / Division of Population Health / Coordinated State Support Branch</p> <p>NIOSH / Pittsburgh Mining Research Division / Dust, Ventilation & Toxic Substances Branch</p> <p>CGH / Division of Global Health Protection / Country Strategy and Implementation Branch</p> <p>ATSDR / Division of Community Health Investigations / Eastern Branch</p> <p>NCHS / Division of Vital Statistics / Data Acquisition, Classification & Evaluation Branch</p> <p>CGH / Division of Global HIV and TB / Economics and Health Services Research Branch</p> | <p>Disorders / Epidemiology and Surveillance Branch</p> <p>CPR / Division of State and Local Readiness / Field Services Branch</p> <p>CGH / Division of Global HIV and TB / Epidemiology and Surveillance Branch</p> <p>NCHHSTP / Division of Tuberculosis Elimination / Field Services Branch</p> <p>NIOSH / Respiratory Health Division / Field Studies Branch</p> <p>NCCDPHP / Division of Reproductive Health / Field Support Branch</p> | <p>CSELS / Division of Health Informatics and Surveillance Systems / Information Systems Branch</p> <p>NCHHSTP / Division of Sexually Transmitted Disease Prevention / Laboratory Reference and Research...</p> <p>NCHS / Division of Vital Statistics / Information Technology Branch</p> <p>NCHS / Office of Information Technology / Information Technology Solutions & Services Staff</p> <p>CSELS / Division of Laboratory Systems / Laboratory</p> | <p>Infectio...</p> <p>NCCDPHP / Division of Reproductive Health / Office of the Director</p> <p>NCCDPHP / Division of Cancer Prevention and Control / Office of the Director/Office of Internatio...</p> <p>NCHS / Division of Vital Statistics / Office of the Director</p> <p>NCEZID / Office of the Director / One Health Office</p> <p>NCHS / Office of Analysis & Epidemiology / Office of the Director</p> <p>CPR / Division of Emergency Operations / Operations Branch</p> <p>CGH / Office of the Director / Office of the Director</p> <p>NCHS / Division of Health & Nutrition Examination Surveys / Operations Branch</p> <p>CSELS / Office of the Director / Office of the Director</p> | <p>NCIRD / Division of Viral Diseases / Respiratory Viruses Branch</p> <p>NCHHSTP / Division of HIV/AIDS Prevention Surveillance & Epidemiology / Quantitative Sciences and...</p> <p>NCEZID / Division of Global Migration and Quarantine / Quarantine and Border Health Services Branch</p> <p>CPR / Division of Strategic National Stockpile / Response Branch</p> <p>NCHS / Division of Vital Statistics / Reproductive Statistics Branch</p> <p>NCEZID / Division of Vector-Borne Diseases / Rickettsial Zoonoses Branch</p> <p>NCIPC / Division of Violence Prevention / Research and Evaluation Branch</p> <p>NIOSH / Education & Information Division / Risk Evaluation Branch</p> <p>NCHHSTP / Division of Adolescent and School Health / Research Application and Evaluation Branch</p> <p>NCCDPHP / Division of Population Health / School Health Branch</p> <p>NIOSH / National Personal Protective Technology Laboratory / Research Branch</p> <p>NCHS / Division of Research & Methodology / Research Data Center</p> |
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| | | | | | | <p>Development Branch</p> <p>NIOSH / Pittsburgh Mining Research Division / Workplace Health Branch</p> <p>NIOSH / World Trade Center Health Program / World Trade Center Health Program</p> <p>NCBDDD / Division of Congenital and Developmental Disorders / Zika Transition Unit</p> <p>CGH / Global Immunization Division / Accelerated Disease Control and Vaccine Preventable Diseases...</p> <p>NCCDPHP / Office on Smoking and Health / Office of the Director</p> |
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