| Currently Collected on OMB (| | | |
|--|----------|---------------|---|
| OMB Clearance # 0925-0001 | | | 1 |
| | Req | | |
| Field Name | Opt | Type of Field | LOV or Notes |
| Nome and ID | | | |
| Name and ID | | | |
| Name Prefix | 0 | Text | |
| First Name | R | Text | |
| Middle Name or Initial | 0 | Text | |
| Last Name Name Suffix | R O | Text Text | |
| eRA Email | R | Text | |
| DRCID ID | R | Text | Will be a data feed from another system |
| Prior Name Prefix | 0 | Text | |
| Prior First Name | 0 | Text | will be required if a prior name is to be added |
| | | | |
| Prior Middle Name or Initial | 0 | Text | |
| Prior Last Name | 0 | Text | will be required if a prior name is to be added |
| Prior Name Suffix | 0 | Text | |
| DENTIFICATION | | | |
| DOB | | | |
| (Include DNWTP option) | R | Date | DNWTP check provided |
| SSN (full or last 4) | 0 | Text | • |
| | | | |
| CITIZENSHIP STATUS | | | |
| Citizenship Country | R | LOV | Country List |
| | | | US Citizen or Non-citizen National |
| | | | Permanent Resident of US |
| Status in the United States | R | Radio Buttons | Non-U.S. Citizen w/a temporary U.S. Visa Non-U.S. CitzenNot Residing in the U.S. |
| Status III the Onited States | | Radio Buttons | |
| DEMOGRAPHICS | | | |
| | | | Female |
| | | | Male |
| Gender | R | Radio Buttons | |
| Ethnicity and Race | | | |
| | | | Hispanic/Latino |
| | | | Non-Hispanic |
| Ethnicity | R | Radio Buttons | DNWTP |
| | | | American Indian or Alaska Native |
| | | | Asian |
| | | | Black or African American |
| | | | Native Hawaiian or Pacific Islander White |
| Race | R | Checkboxes | DNWTP |
| Disability | | | |
| Do you have? | R | Y/N | |
| | | | Vision |
| | | | Hearing |
| | | | Mobility/Orthopedic |
| Type of Disability (Check | | Charlet | Other |
| all that apply) | R | Checkboxes | DNWTP |
| | | | No |
| | | | Yes DNWTP |
| Disadvantaged Background? | R | Radio Buttons | Not Applicable to me |
| and a subsection of the second s | | | |
| TRAINING AND CAREER | | | |
| DEVELOPMENT SPECIFIC | | | |
| DATA | | | |
| Non-Deliquency on US | | | No |
| Federal Debt? | R | Radio Buttons | Yes |
| Text Entry field if Yes | <u> </u> | Text | |
| | | | |
| | | | No |
| | | | Yes |
| Disadvantaged Background? | R | Radio Buttone | DNWTP Not Applicable to me (not an undergraduate) |
| Sisaavamayea Daekyroana: | | | not a pprocesso to me (not an undergraduate) |
| | | | 1 |
| EMPLOYMENT | | | |

| Attachment 15 - eRA Commons Person Profile Data | | | | | | |
|---|------------|---------------|---|--|--|--|
| Currently Collected on OMB Cleared Forms | | | | | | |
| DMB Clearance # 0925-0001 | | | | | | |
| | | | | | | |
| Field Name | Req Opt | Type of Field | LOV or Notes | | | |
| Add a New Job | Ορι | Type of Field | | | | |
| Employer: Select one: | R | | | | | |
| | | | When selected an LOV of organizations | | | |
| I work in a company or | | | registered in the eRA Commons is available | | | |
| institution outside NIH | | Radio Button | to select from | | | |
| I work inside NIH | | Radio Button | When selected, a LOV of NIH ICs is available | | | |
| | | | | | | |
| Start Date | R | Date | | | | |
| End Date | 0 | Date | | | | |
| Job Title | 0 | Text | | | | |
| About This Job | | | | | | |
| About This Job Primary Employment? | R | Checkbox | | | | |
| Primary Employment? | ĸ | CHECKDOX | | | | |
| | | | Full-Time | | | |
| | R | Radio Button | Part-Time | | | |
| | | Ballon Ballon | | | | |
| This is a job working directly | | | Yes | | | |
| for the federal government. | R | Radio Button | No | | | |
| This is a faculty teaching | | | If Checked, then the following Academic | | | |
| position. | 0 | Checkbox | Rank LOV is used | | | |
| | | | Assistant Professor | | | |
| | | | Associate Professor | | | |
| | | | Instructor | | | |
| | | | Other | | | |
| Academic Rank | 0 | LOV | Professor | | | |
| This is an academic | | | If Checked, then the following Position LOV | | | |
| administrative position. | 0 | Checkbox | is used | | | |
| | | | Assistant or Associate Dean Chairperson of Dept (or Director) Dean Other | | | |
| Position | 0 | LOV | President Vice President | | | |
| Addresss & Contact Information | | | | | | |
| E-mail | R | Text | | | | |
| Phone | R | Text | | | | |
| Street Address Line 1 | R | Text | | | | |
| Street Address Line 2 | 0 | Text | | | | |
| City | R | Text | | | | |
| State | R | LOV | State List | | | |
| ZipCode | R | Text | | | | |
| Country | R | LOV | Country List | | | |
| | | | | | | |
| Reviewer Information | - | | Options: | | | |
| What address should NIH | | | Use my work address | | | |
| use to contact you for reviews? | | Padia Duttar | Use my home address | | | |
| reviews? | | Radio Button | Provide a different address If checked | | | |
| Different Address | | | | | | |
| Street Address | R | Text | | | | |
| City | R | Text | | | | |
| State | R | LOV | | | | |
| ZipCode | R | Text | | | | |
| Country | R | LOV | Country List | | | |
| | 1 | | | | | |
| Home Address | | | | | | |
| Street Address | R | Text | | | | |
| City | R | Text | | | | |
| State | R | LOV | State List | | | |
| ZipCode | R | Text | | | | |
| Country | R | LOV | Country List | | | |
| | 1 | | - | | | |

| Attachment 15 - eRA Commons Person Profile Data | | | | | |
|--|----------|----------------|---|--|--|
| Currently Collected on OMB Cleared Forms | | | | | |
| OMB Clearance # 0925-0001 | | | | | |
| | | | | | |
| | Req | | | | |
| Field Name | Opt | Type of Field | LOV or Notes | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | LOV updated annually. Current values are: | | |
| | | | Lov updated annoally. Current values are. | | |
| | | | Eligibility Period: 08/16/2012 – 09/30/2013 | | |
| | | | Eligibility Period: 08/16/2013 – 09/30/2014 | | |
| Eligibility for Continuous | | | Eligibility Period: 08/16/2014 – 09/30/2015 | | |
| Submission | | LOV | | | |
| | | | | | |
| TRAINEE PERMANENT | | | | | |
| ADDRESS | | | | | |
| Street Address | R | Text | | | |
| City | R | Text | | | |
| State | R | LOV | State List | | |
| ZipCode | R | Text | | | |
| Country | R | LOV | Country List | | |
| E-mail | R | Text | | | |
| Phone | R | Text | | | |
| | | | | | |
| EDUCATION | | | | | |
| | | | | | |
| Degrees | | | | | |
| Degree Name | R | LOV | See separate Tab for LOV | | |
| Degree Text (for Other) | 0 | Text | | | |
| Status: | | Radio Buttons | | | |
| Degree Completed | R | | w/Corresponding Date Field | | |
| In Progress, expected | | Radio Buttons | w/Corresponding Date Field | | |
| | | | | | |
| Length of Program (# of Yrs) | 0 | LOV | 1 - 9 Years | | |
| Institution | R | Text | | | |
| Location (if not in US, | | | | | |
| indicate city & country) | 0 | Text | | | |
| Is this your Terminal | | | | | |
| Research Degree? | 0 | Checkbox | | | |
| Area of Study-Primary | 0 | Text | | | |
| Area of Study-Secondary | 0 | Text | | | |
| Area of Residency | _ | _ | | | |
| | 0 | Text | | | |
| Residency Date Completed | | | | | |
| or Expected | | | | | |
| | R | Date | | | |
| System Generated Fields | | | | | |
| Fields used to aid in NI/ESI effo | rts. All | are system-gen | erated but part of the Person Profile | | |
| | |)/aa/N/- | | | |
| ESI Eligibility | | Yes/No | | | |
| End of Eligibility Date | | Date | | | |
| New Investigator Eligibility | | Yes/No | | | |
| Appeal Date | | Date | | | |
| Appeology Anternation policy has These exceptions are handled v | | | | | |
| THESE EXCEPTIONS ARE HANDIED V | na an à | ορεαι μιοσθός. | | | |
| Reference Ltrs | | | | | |
| Referee First Name | R | | | | |
| Referee Last Name | R | | | | |
| Referee MI Name | к 0 | | | | |
| Referee eMail | R | | | | |
| | • • | | | | |
| Referree Institution/Affliation | P | | | | |
| | R | | | | |
| Referree Department PI Commons User ID | R | | | | |
| PI Commons User ID PI Last Name | R R | | | | |
| | | | | | |
| FOA Number | R | | | | |
| Reference Letter | | | | | |
| Confirmation # (if re- | | | | | |
| submitting) | 0 | | | | |

Degrees LOV in Person Profile

| AB | BACHELOR OF ARTS |
|--------------|--|
| BA | BACHELOR OF ARTS |
| BOTH | OTHER BACCALAUREATE |
| BS | BACHELOR OF SCIENCE |
| BSN | BACHELOR OF SCIENCE IN NURSING |
| DC | DOCTOR OF CHIROPRACTIC |
| DDOT | OTHER DOCTOR OF MEDICAL DENTISTRY |
| DDS | DOCTOR OF DENTAL SURGERY |
| DMD | DOCTOR OF MEDICAL DENTISTRY |
| DNSC | DOCTOR OF NURSING SCIENCE |
| DO | DOCTOR OF OSTEOPATHY |
| DOTH | OTHER DOCTORATE |
| DPH | DOCTOR OF PUBLIC HEALTH |
| DPM | DOCTOR OF PODIATRIC MEDICINE |
| DRPH | DOCTOR OF PUBLIC HEALTH |
| DSC | DOCTOR OF SCIENCE |
| DSW | DOCTOR OF SOCIAL WORK |
| DVM | DOCTOR OF VETERINARY MEDICINE |
| EDD | DOCTOR OF EDUCATION |
| ENGD | FOREIGN - DOCTOR OF ENGINEERING |
| FAAN | FELLOW OF THE AMERICAN ACADEMY OF NURSING |
| JD | DOCTOR OF JURIS PRUDENCE |
| MA | MASTER OF ARTS |
| MB | FOREIGN - BACHELOR OF MEDICINE |
| MBA | MASTER OF BUSINESS ADMINISTRATION |
| MBBS | FOREIGN - BACHELOR OF MEDICINE AND SURGERY |
| MD | DOCTOR OF MEDICINE |
| MDOT | OTHER DOCTOR OF MEDICINE |
| MLS | MASTER OF LIBRARY SCIENCE |
| MOTH | OTHER MASTERS |
| MPA | MASTER OF PUBLIC ADMINISTRATION |
| MPH | MASTER OF PUBLIC HEALTH |
| MS | MASTER OF FOBLIC HEALTH MASTER OF SCIENCE |
| MSN | MASTER OF SCIENCE IN NURSING |
| ND | DOCTOR OF NATUROPATHY |
| OD | |
| ОЛН | DOCTOR OF OPTOMETRY OTHER |
| PHD | |
| PHD PHMD | |
| PHMD PSYD | |
| | |
| RN | |
| SCD | DOCTOR OF SCIENCE |
| | OTHER DOCTOR OF VETERINARY MEDICINE |
| VMD | DOCTOR OF VETERINARY MEDICINE |