OMB Control No. 0551-New Expiration Date: ##/##/####

## BFP Program Evaluation [Fellow]

Please complete this form and return to: $\_$	no later than _	weeks after the visit to
the Host Institution.	_	_

Ва	sic Information
Yo	ur Name and contact information (email, phone, and mailing address):
Но	ome Country:
Se	x:
Hiç	ghest education level at application: Masters/PhD/other
(sp	pecify:_
) B	SFP Cycle #:
<u>Ov</u>	verall Thoughts about Your Borlaug Fellowship
pro ea	e are interested in learning about your experience with the Borlaug Fellowship ogram. Please indicate where appropriate, on a scale of 1 to 5, your response to ch of the questions below, with $1 = \mathbf{not}$ at all and $5 = \mathbf{better}$ than expected. r each question, explain the reason for your scoring.
	Did your experience with the Borlaug Fellowship Program match e research experience you expected?
Sc	ore (Please circle your answer): 1 2 3 4 5
Ex	plain your answer:
2.	Was your Mentor accessible enough to meet your needs related to the fellowship?
Sc	ore (Please circle your answer): 1 2 3 4 5
Ex	plain your answer:
3.	Did you feel that your research topic was an appropriate match with your Mentor?
Sc	ore (Please circle your answer): 1 2 3 4 5
Ex	plain your answer:

4. Did you complete the research study you proposed in your action plan/proposal? Check one: YES $\square$ NO $\square$				

Explain your answer:				
5. Do you feel you obtained new or improved skill during your				
fellowship experience? Check one: YES $\square$ NO $\square$				
Explain your answer:				
6. Did the mix of classroom, laboratory, and field activities help you achieve your research goals?				
Score (Please circle your answer): 1 2 3 4 5				
Explain your answer:				
7. Did the housing, transportation, and other resources provided by your host institution meet your expectations?				
Score (Please circle your answer): 1 2 3 4 5				
Please describe any deficiencies or particularly good experiences.				
8. Did your views of the United State change as a result of experience with the Borlaug Fellowship Program? (The change can be positive or negative).				
Check one: YES □ NO □				
Explain your answer:				
9. During your 12-weeks with your Host Institution did you attend any professional development events or conferences?				
Check one: YES $\square$ $\;\;$ NO $\square$ If YES, please include the names and dates of these events:				
10. Have you and your Mentor planned the				
reciprocal visit? Check and VES - NO				

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11.	Overall, how was	your ex	perience wi	th the	<b>Borlaug</b>	Fellowship	Program?

Score (Please circle your answer): 1 2 3 4 5

Explain your answer:

## Impact of your Borlaug Fellowship

- 12. What were your research and training goals during your Fellowship? Were you able to accomplish them? If not, what were the difficulties that you experienced that prevented you from doing so?
- 13. How do you envision your participation in this program benefiting you in the future?
- 14. How do you envision your participation in this program benefiting your institution in the future?
- 15. Please list specific examples of changes or improvements you will make to your organization upon your return.
- 16. What information did you obtain that will be the most useful in your work in your home country?
- 17. Has the Borlaug Fellowship Program given you new ideas or areas of interest to pursue professionally when you return to your home country? Please list them below.
- 18. List 1 or 2 of your proudest personal accomplishments during your Borlaug Fellowship Program.
  - Please upload any materials related to your fellowship experience, including but not limited to photos with captions (action photos showing your working with your Mentor or conducting research are preferred), detailed descriptions of experiments and subsequent data gathered in tables or other appropriate figures.

 Do you give USDA permission to use your photos on its website and other promotional materials?\_\_YES\_\_\_NO

## **Collaboration Resulting from Your Borlaug Fellowship**

- 19. Do you intend to continue your collaboration with your Mentor If so, in what way will you do this?
- 20. Do you intend to continue your collaboration with others (e.g., other scientists, faculty, graduate students) you met through the program? If so, please indicate the positions they hold and how you will continue working with them.
- 21. Do you intend to continue or initiate collaboration with other Fellows you may have met while participating in the Borlaug Fellowship Program. If so, in what way will you do this?
- 22. In your opinion, how could future training programs be improved?

Please provide any additional comments and suggestions about the Borlaug Fellowship Program and your experience

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