

The NIH SGM SIG Grantspersonship Session Customer Feedback

OMB Number: 0925-0648 (Expiration Date:
06/30/2024)

Public reporting burden for this collection of information is estimated to average 5-minutes per submission. 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA 0925-0648. Do not return the completed form to this address. Thank you for your participation in this workshop. Please take a moment to complete the following assessment.

1. What is your current role at your institution?

- Graduate Student
- Post-doc
- Research Investigator
- Early-Stage Investigator
- Established Investigator

Other

2. Please indicate whether you agree or disagree with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
This workshop increased my understanding of NIH programs and grant-making processes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This workshop increased my understanding of the NIH peer review process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This workshop provided me with an opportunity to interact with NIH staff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Please rate the effectiveness of today's sessions:

	Excellent	Good	Fair	Poor
NIH Grantspersonship Overview	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Peer Review Overview	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Breakout Room Discussions

Excellent	Good	Fair	Poor
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. How would you rate your level of knowledge about this content before the session?

1 (Low)	2	3	4	5 (High)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. How would you rate your level of knowledge about this content after the session?

1 (Low)	2	3	4	5 (High)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. On a scale of 1 to 10, how likely will you be to apply this training to your research career?

1 (not very likely)	2	3	4	5	6	7	8	9	10 (very likely)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Please explain why you chose your answer above.

8. What suggestions do you have for changes to future sessions that would make it more useful to participants like you?

Done

Powered by



See how easy it is to [create a survey](#).

[Privacy & Cookie Notice](#)