EVENT REGISTRATION

OMB Number: 0925-0299 Expiration Date: 30 May 2024 Burden Time: 3 minutes

Collection of this information is authorized by The Public Health Service Act, Section 410 (42 USC 285). Rights of participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. The information collected in this study will be kept private to the extent provided by law. Names and other identifiers will not appear in any report of the study. Information provided will be combined for all participants and reported as summaries.

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CONTACT INFORMATION		
Q1 Badge ID:		
Q2 ORC ID		
Q3 Greeting Title: o <no response=""> o Mr. o Ms. o Mx. o Dr.</no>		
Q4 First Name (Given Name):		
Q5 First Name (Preferred Name):		
Q6 Last Name (Family Name):		
Q7 Email Address (check accuracy):		
Q8 Phone Number (check accuracy):		
Q9 Position Title:		

Q10 LinkedIn
Q11 Is this person the point of contact (Yes/No)? O Yes O No
INSTITUTION OR ORGANIZATION INFORMATION
Q12 Institution or Organization Name
Q13 Program or Department Name
Q14 Program Name for Publication Materials
Q15 Type of Program
Q16 Address or Location
Q17 Website URL

EDUCATIONAL OR TRAINING INFORMATION

Q18 NIH Institute-Center

- \circ CC
- CIT 0
- CSR 0
- 0 FIC
- **NCATS** 0
- NCCIH 0
- NCI-CCR 0
- **NCI-DCEG** 0
- NEI 0
- NHGRI 0
- NHLBI 0
- NIA 0
- 0 NIAAA
- NIAID 0
- NIAMS 0
- NIBIB 0
- NICHD
- 0
- NIDA 0
- NIDCD 0
- NIDCR 0
- **NIDDK** 0
- 0 NIEHS
- NIGMS 0
- NIMH 0 NIMHD 0
- NINDS 0
- NINR 0
- NLM 0
- OD

Q19 NIH Campus

- Bethesda, Maryland (main campus) 0
- Baltimore, Maryland 0
- o Frederick, Maryland
- Gaithersburg, Maryland 0
- Poolesville, Maryland 0
- Rockville, Maryland 0
- Framingham, Massachusetts 0
- 0 Research Triangle Park, North Carolina
- Hamilton, Montana
- Phoenix, Arizona 0
- other

Q20 Edi	ucational Status or Training Program
0	Summer Intern
0	Postbaccalaureate
0	Graduate Student (master degree)
0	Graduate Student (doctoral degree)
0	Medical Student
0	Dental Student
0	Postdoctorate: IRTA / CRTA
0	Postdoctorate: Clinical Fellow
0	Postdoctorate: Research Fellow
0	Postdoctorate: Visiting Fellow
0	Staff Clinician
0	Staff Scientist
0	NIH Investigator
0	NIH Training Director
0	NIH Staff
0	OITE Staff
Q21 Hig	ghest Education Degree you have been awarded or will be being awarded: High School Graduate (diploma or equivalent) Some college but no degree Associate Degree (2-year)
	Bachelor Degree (BA or BS)
	Master Degree (MA, MS, MEd)
	Doctorate or Advanced Professional Degree (PhD, JD, MD, EdD, DDS, DVM)
	Other
O22 Wł	nat is your educational year?
0	Graduate
0	First Year
0	Second Year
0	Third Year
0	Fourth Year
0	Fifth Year
0	Greater than Fifth Year

Q23 W	nat is your educational major?
0	Biochemistry and Biophysics
0	Biomedical and Bioengineering
0	Bioinformatics
0	Biology
0	Cell and Molecular Biology
0	Chemistry
0	Computer Science
0	Data Science
0	Environmental Science
0	Engineering
0	Epidemiology
0	Genetics
0	Humanities and the Arts
0	Immunology
0	Information Science
0	Mathematics
0	Medicine (Pre-Med)
0	Microbiology
0	Neuroscience
0	Nursing
0	Nutrition
0	Pharmaceutical Sciences
0	Physics
0	Physiology
0	Psychology
0	Public Health
0	Veterinary Medicine (Pre-Vet)
0	Virology
0	Zoology
0	Undeclared
Q24 NII	H Mentor / Investigator
Q25 Un	iversity Mentor / Professor
EVENT	OR MEETING DETAILS
026 Fo	rmat type
0	In-Person
0	Virtual
0	Hybrid
O	Tryona
	w will you participate?
	Oral presentation
	Panel Discussion
	Breakout Session
Q28 Ho	w did you learn about this program or event?