

Individuals Survey

Start of Block: Default Question Block

Q1 NSF Engines: Individuals Survey

Background

Innovations in science and engineering have enabled the United States to become a world-leading economy, powered by a well-trained scientific and technical workforce. To ensure the United States remains at the vanguard of competitiveness, the United States must rapidly expand its innovation capacity by leveraging the resources, creativity, and ingenuity of every region of the country. The [NSF Regional Innovation Engines \(NSF Engines\) program](#) aims to expand and accelerate scientific and technological innovation within the United States by catalyzing regional innovation ecosystems throughout every region of our Nation to create a future in which all sectors of the American population can participate in and benefit from advancements in scientific research and development equitably to advance U.S. global competitiveness and leadership.

This survey is designed to gather information on everyone who is involved or participates in any Engine activities, initiatives, or efforts including those who serve on an NSF Engine leadership team, governance board, or advisory committee. **Any information—be it for internal use or public release (e.g. in the form of statistical summaries)—will be in a form that does not personally identify you or other respondents.** The primary use of the data collected is to inform and enhance the NSF Engines program, so to allow NSF to better serve its community and stakeholders. Data collected from this intake questionnaire will be made available to the external evaluation team of each Engine awardee.

Questions regarding the survey can be directed to Enginesdata@nsf.gov.

Pursuant to 5 CFR 1320.5(b), an agency may not conduct or sponsor, and a person is not required to respond to an information collection unless it displays a valid OMB control number. The OMB control number for this collection is 3145-XXXX. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing this burden, to: Suzanne H. Plimpton, Reports Clearance Officer, National Science Foundation, 2415 Eisenhower Ave., Suite W18200, Alexandria, VA 22314; telephone (703) 292-7556; or send email to splimpto@nsf.gov.

End of Block: Default Question Block

Start of Block: Primary dimensions of diversity

Q2 Please enter your date of birth (mm/dd/yyyy).

Q3 Please select your race (select all that apply)

American Indian or Alaskan Native

Asian

Black or African-American

Native Hawaiian or other Pacific Islander

White

Other (please specify) _____

I prefer not to answer

Q4 Please indicate your ethnicity

I am Hispanic or Latino or Spanish in origin

I am not Hispanic or Latino or Spanish in origin

I prefer not to answer

Q5 Which of the following best represents how you think of yourself?

- Straight, that is not gay or lesbian
 - Gay or lesbian
 - Bisexual
 - I use a different term _____
 - I don't know
 - I prefer not to answer
-

Q6 What sex were you assigned at birth, on your original birth certificate?

- Female
 - Male
 - I prefer not to answer
-

Q7 How do you currently describe yourself (select all that apply)?

- Female
 - Male
 - Transgender
 - I use a different term _____
 - I prefer not to answer
-

Display This Question:

If "I prefer not to answer" is not selected in Q6 AND "I prefer not to answer" is not selected in Q7

Q8 Just to confirm, you were assigned *[answer choice in Q6]* at birth and now you describe yourself as *[answer choice in Q7]*. Is that correct?

Yes

No

Q9 Please indicate the country in which you were born

▼ [dropdown list of 197 countries recognized by the U.S. State department. Countries are presented in alphabetical order after the United States of America]

Q10 Are you deaf, or do you have serious difficulty hearing?

Yes

No

I prefer not to answer

Q11 Are you blind, or do you have serious difficulty seeing, even when wearing glasses?

Yes

No

I prefer not to answer

Q12 Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

Yes

No

I prefer not to answer

Q13 Do you have serious difficulty walking or climbing stairs?

Yes

No

I prefer not to answer

Q14 Do you have difficulty dressing or bathing?

Yes

No

I prefer not to answer

Q15 Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

- Yes
- No
- I prefer not to answer

End of Block: Primary dimensions of diversity

Start of Block: Secondary dimensions of diversity

Q16 What is your marital status?

- Married
 - Widowed
 - Separated
 - Single (never married)
 - Divorced
 - I prefer not to answer
-

Q17 Are you a U.S. citizen?

- Yes, I am a U.S. citizen
 - No, I am not a U.S. citizen
 - I prefer not to answer
-

Display This Question:

If answer option "No, I am not a U.S. citizen" is selected in Q17

Q18 Please select your country of citizenship

▼ [dropdown list of 196 countries recognized by the U.S. State department, not including the United States. Countries are presented in alphabetical order]

Q19 What is the highest level of school you have completed or the highest degree you have received?

- Less than high school diploma
 - High school degree or equivalent (e.g., GED)
 - Some college but no degree
 - Associate degree (e.g., AA, AS)
 - Bachelor's degree (e.g., BA, BS)
 - Master's degree (e.g., MA, MS, Med)
 - Professional degree (e.g., MD, DDS, DVM)
 - Doctorate (e.g., PhD, EdD)
 - I prefer not to answer
-

Q20 Which of the following categories best describes your employment status?

- Employed, part time (working 1-39 hours per week)
 - Employed, full time (working 40 or more hours per week)
 - Not employed, looking for work
 - Not employed, not looking for work
 - Student
 - Homemaker
 - Retired
 - Disabled, not able to work
 - Self-employed
 - I prefer not to answer
-

Q21 How much total combined money did all members of your household earn in [previous year]? Please report the total amount of money earned—do not subtract the amount you paid in taxes or any deductions listed on your tax return.

- \$0-\$4,999
- \$5,000-\$7,499
- \$7,500-\$9,999
- \$10,000-\$12,499
- \$12,500-\$14,999
- \$15,000-\$19,999
- \$20,000-\$24,999
- \$25,000-\$29,999
- \$30,000-\$34,999
- \$35,000-\$39,999
- \$40,000-\$49,999
- \$50,000-\$59,999
- \$60,000-\$74,999
- \$75,000-\$99,999
- \$100,000-\$149,999
- \$150,000 or more
- I prefer not to answer

Q22 How much money did you personally earn in [enter previous year]? Please report the total amount of money earned—do not subtract the amount you paid in taxes or any deductions listed on your tax return.

- \$0-\$4,999
- \$5,000-\$7,499
- \$7,500-\$9,999
- \$10,000-\$12,499
- \$12,500-\$14,999
- \$15,000-\$19,999
- \$20,000-\$24,999
- \$25,000-\$29,999
- \$30,000-\$34,999
- \$35,000-\$39,999
- \$40,000-\$49,999
- \$50,000-\$59,999
- \$60,000-\$74,999
- \$75,000-\$99,999
- \$100,000-\$149,999
- \$150,000 or more
- I prefer not to answer

Q23 How many children do you have?

None

1

2-4

More than 4

I prefer not to answer

Q24 Which languages do you speak fluently? (select all that apply)

English

Spanish

Chinese

Tagalog

Vietnamese

French

Arabic

Korean

Russian

German

Other (please specify) _____

I prefer not to answer

Q25 Did you ever serve on active duty in the U.S. Armed Forces?

Yes

No

I prefer not to answer

Q26 Please enter the zip code associated with your current address.

End of Block: Secondary dimensions of diversity

Q27 through Q34 are displayed only if the role of the individual from the intake: individuals survey is

"The individual is on the Engine's leadership team including the CEO,"

"The individual serves on the Engine's governance board,"

"The individual serves on the Engine's advisory committee(s),"

"The individual is a programmatic lead for R&D,"

"The individual is a programmatic lead for translation,"

"The individual is a programmatic lead for diversity, equity, inclusion, and accessibility (DEIA),"

"The individual is a programmatic lead for workforce development," OR

"The individual is a programmatic lead for ecosystem building."

Start of Block: Governance board, leadership team, advisory committee, programmatic leads

Q27 You have been identified as someone who serves on the *[Insert Engine name]*'s leadership team, governance board, advisory committee, or is a programmatic lead. Please indicate if this information is correct.

- Yes, this information is correct
- No, this information is not correct

Skip To: End of Survey if answer option "No, this information is not correct" is selected in Q27

Q31 Please indicate how often you engage with each person you listed in decision-making activities.

	Never	Daily	2-3 times a week	Weekly	Bi-weekly	Monthly	Quarterly or less
Name of individual 1	<input type="radio"/>						
Name of individual 2	<input type="radio"/>						
Name of individual 3	<input type="radio"/>						

Q32 Please indicate how often you socialize (e.g., have lunch, dinner, drinks, or engage in other informal activities) with each person you listed.

	Never	Daily	2-3 times a week	Weekly	Bi-weekly	Monthly	Quarterly or less
Name of individual 1	<input type="radio"/>						
Name of individual 2	<input type="radio"/>						
Name of individual 3	<input type="radio"/>						

Q33 Please indicate how long you have known each person you listed.

	Less than 1 year	1-2 years	3-5 years	6-10 years	Over 10 years
Name of individual 1	<input type="radio"/>				
Name of individual 2	<input type="radio"/>				
Name of individual 3	<input type="radio"/>				

Q34 Please indicate where each person is in the organizational hierarchy relative to you.

	Higher than you	Equal to you	Lower than you	I don't know
Name of individual 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Name of individual 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Name of individual 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q35 is displayed only if the role of the individual from the intake: individuals survey is "The individual is a research and development (R&D) participant (e.g., undergraduate and graduate students, post-docs, researchers,PIs)"

Start of Block: R&D participants

Q35 Please select the category that best describes you. I am a:

- Undergraduate student
- Master's student
- PhD student
- Post-doctoral researcher
- Assistant professor
- Associate professor
- Full professor
- Visiting faculty
- Industry researcher
- Researcher at a national lab
- Other (please specify) _____

End of Block: R&D participants

Q36 through Q40 are displayed only if the role of the individual from the intake: individuals survey is "The individual is a workforce development participant"

Start of Block: WFD participants

Q36 You have been identified as someone who participated in a workforce development activity.

Please indicate if this is correct.

Yes, this is correct

No, this is not correct

Skip To: End of Survey if answer option "No, this is not correct" is selected in Q36

Q37 Do you have a currently active professional certification or a state or industry license?

Do not include business licenses, such as a liquor license or vending license.

Yes, I have an active professional certification or a state or industry license

No, I do not have an active professional certification or a state or industry license

I do not know if I have an active professional certification or a state or industry license

Display This Question:

If answer option "Yes, I have an active professional certification or a state or industry license" is selected in Q37

Q38 Were any of your certifications or licenses issued by the federal, state, or local government?

- Yes, 1 or more of my certifications or licenses is issued by the federal, state, or local government
 - No, none of my certifications or licenses are issued by the federal, state, or local government
 - I do not know if any of my certifications or licenses are issued by the federal, state, or local government
-

Display This Question:

If answer option "Yes, I have an active professional certification or a state or industry license" is selected in Q37 and answer option "Employed, part time (working 1-39 hours per week)" is selected in Q19

Or

If answer option "Yes, I have an active professional certification or a state or industry license" is selected in Q37 and answer option "Employed, full time (working 40 or more hours per week)" is selected in Q19

Q39 You indicated that you have a currently active professional certification or license. Is your certification or license required for your main job?

- Yes, my certification or license is required for my main job
 - No, my certification or license is not required for my main job
-

Display This Question:

If answer option "Yes, I have an active professional certification or a state or industry license" is selected in Q37 and answer option "Not employed, looking for work" is selected in Q19

Q40 You indicated that you have a currently active professional certification or license. Was your certification or license required for your job at which you last worked?

- Yes, my certification or license was required for the job that I last worked
- No, my certification or license is not required for the job that I last worked

End of Block: WFD participants
