

## Exit Survey Part 2: Assess your Experience

25%

### OMB Burden Statement

OMB NO: 0925-0772

Expiration Date: October 31, 2024

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **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-XXXX). Do not return the completed form to this address.

### Basic Information

Please select the fellowship program(s) in which you participated. Please mark all that apply.

#### Intramural Research Training Award (IRTA) Fellow (US Citizens and Permanent Residents):

- Summer Intern
- Postbaccalaureate Fellow - Bachelor Level
- Postbaccalaureate Fellow - Master Level
- Graduate Student - Master Level
- Graduate Student - Doctoral Level
- Postdoctoral Fellow

#### Visiting Fellow (on a training visa)

- Graduate Student - Doctoral Level
- Predoctoral Fellow
- Postdoctoral Fellow

#### Federal Employee (FTE)

- Research Fellow/ Clinical Fellow

ORISE Fellow

Not Applicable

Other (please specify)

Please select the most recent position you held at NEI:

--Select--

Please select your highest education level:

--Select--

Next

## Exit Survey Part 2: Assess your Experience

50%

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### Future Plans

Please select the reason(s) for your departure:

- Taking professional scientific position
- Going to school/doing additional training
- Voluntary resignation related to my research
- Voluntary resignation related to personal reasons
- Involuntary separation
- Changing career
- Other (please specify)

Are you pursuing additional education/training?

- Master Degree
- Doctoral Degree
- Medical Degree
- Clinical Training
- Not Applicable
- Other (please specify)

If you have taken a new job, at what type of organization will you be working?

- Academia
- Government
- Industry/For-Profit
- Not-for-profit
- Not Applicable
- Other Sector(please specify)

What duties will your job include? Please mark all that apply:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Clinical               | <input type="checkbox"/> Communications     |
| <input type="checkbox"/> Consulting     | <input type="checkbox"/> Intellectual Property  | <input type="checkbox"/> Project Management |
| <input type="checkbox"/> Policy         | <input type="checkbox"/> Research               | <input type="checkbox"/> Teaching           |
| <input type="checkbox"/> Not Applicable | <input type="checkbox"/> Other (please specify) |   |

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Exit Survey Part 2: Assess your Experience

75%

**OMB Burden Statement**  
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Mentoring Relationship

How well did your mentor do the following within your Laboratory/Branch/Office?	Excellent	Good	Fair	Poor	Don't Know
<b>COMMUNICATE EFFECTIVELY</b>					
Communicated openly, frequently, and respectfully with you.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provided consistent, timely, and honest feedback.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Encouraged open discussion about ideas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Listened carefully and discussed concerns.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Comment:</b>	<input type="text"/>				
<b>FOSTER A SUPPORTIVE ENVIRONMENT</b>					
Maintained a relationship based on trust and mutual respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provided a workplace free from harassment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Familiarized you with standard operating procedures and assisted you to navigate your organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Understood your unique situation and mentored you accordingly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Set clear expectations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Connected you with the colleagues and resources needed to do your work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supported your success and helped you achieve your career goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reviewed your work thoughtfully and carefully.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Comment:</b>	<input type="text"/>				
<b>PROMOTE YOUR PROFESSIONAL DEVELOPMENT</b>					
Reviewed your progress regularly and discussed any problems you encounter.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supported your attendance at training events to help you with your work and career goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identified and encouraged networking opportunities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Comment:</b>	<input type="text"/>				



## Exit Survey Part 2: Assess your Experience

100%

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### Overall Experience

How satisfied were you with your training experience at NEI?

- Very satisfied  
  Somewhat satisfied  
  Somewhat dissatisfied  
  Very dissatisfied

Comment:

To what extent do you agree or disagree with the following statements about your experience at the NEI?

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
In general, I liked the people with whom I worked most closely.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt the work I did was important.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt my work contributions were valued.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In general, I looked forward to coming to work at NEI.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I had the basic tools, equipment, and resources needed to do my job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I obtained the training required to do my job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I received opportunities to expand my skills in my position.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I received training that prepared me for my next position or future career.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comment:

What were the most beneficial aspects of your training experience?

What were the most challenging aspects of your training experience?

Is there anything not mentioned above that could have been done to improve your training, professional development and overall experience?

Would you recommend training at NEI to a friend or colleague?

- Definitely yes  
  Probably yes  
  Maybe  
  Probably not  
  Definitely not

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