Expiration Date: 06/30/2025

Attachment 1. 2025 CDC Division of Workforce Development (DWD) Fellowship Webinar Customer Service Feedback Survey

PAGE 1. INTRODUCTION

Thank you for attending the [INSERT NAME] Webinar. We greatly appreciate your participation, and we are interested in your honest and constructive feedback to help us to continually improve our informational and application webinars. The survey should take an average of **7 minutes** to complete. Your participation is completely voluntary. Your individual responses will be kept secure and not shared, and data will be reported in the aggregate.

To ensure that your responses are being saved as you navigate through the survey, please use the "Previous" and "Next" buttons at the bottom of each page (NOT the "Back" and "Forward" buttons in your browser). If you exit the survey before submitting it, you will not be able to return to edit your responses.

If you encounter any problems or have questions about the survey, please contact [CONTACT EMAIL]. Thank you! We look forward to your attendance in our future webinars.

Notice: By continuing to the next screen, you consent to complete this survey.

The public reporting burden of this collection of information is estimated to average 7 minutes per response, including 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 CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333 ATTN: PRA (0920-1050)

PAGE 2. BACKGROUND INFORMATION

To return to a previous page, use the "Previous" button at the bottom of the page (**NOT** the "Back" button in your browser). To advance, use the "Next" button at the bottom of the page. Top of Form

1. Which webinar(s) did you recently attend? Select all that apply.

- o [WEBINAR TITLE/DATE]
- O I did not attend any of the above webinar(s) (skip to end of survey)

PAGE 3. BACKGROUND INFORMATION

To return to a previous page, use the "Previous" button at the bottom of the page (**NOT** the "Back" button in your browser). To advance, use the "Next" button at the bottom of the page.

2. How did you hear about the webinar? (Select all that apply)

- o CDC websites about the fellowship
- O Handshake platform (opportunity posting, direct message, webinar event, Ambassadors)
- O Other job search platform (e.g., Indeed, Zip Recruiter, USAJOBS)
- O Current participants
- 0 Program staff
- O Program alumni
- O Current or former program mentors/ supervisors
- O Academic network or institution alumni
- O Academic network or institution career services
- Academic network or institution <u>faculty or staff</u>
- o Email notices about the fellowship (e.g., CDC university, professional network listsery)
- o X (formerly Twitter)
- o Facebook
- 0 Instagram
- o LinkedIn
- Other social media platform (please specify)

3. Why did you attend this webinar? (Select all that apply)

- 0 To learn about working in the public health field
- O To learn about working at CDC
- o To learn about working for the federal government
- o To learn about fellowship eligibility requirements
- O To learn about how to strengthen my application for a fellowship

	0	In doctoral degree program (such as MI	D, PhD)				
	0	Graduated from a doctoral degree prog	ram				
	0	Other (please specify)					
5. 9	Select tl	ne program/fellowship you are most into	erested in:				
	0	Epidemic Intelligence Service (EIS)					
	0	Epidemiology Elective Program (EEP)					
	0	Laboratory Leadership Service (LLS)					
	0	CDC Steven M. Teutsch Prevention Effe	ctiveness Fello	wship (PE)			
	0	Public Health Informatics Fellowship Pro	ogram (PHIFP)				
	0	Evaluation Fellowship Program (EFP)					
	0	Public Health Associate Program (PHAP)				
	0	None of the above/I do not intend to ap	oply				
6.	Have y	ou applied to a CDC fellowship in the pa	st 12 months?				
	0	No					
	0	Yes (if yes, specify:)					
PA	GE 4.	WEBINAR FEEDBACK					
То	return t	o a previous page, use the "Previous" but	ton at the bott	om of the p	age (NOT the	"Back" b	utton in vour
		To advance, use the "Next" button at the		-			,
7 F	Please i	ndicate the extent to which you agree w	ith the followi	ng statemei	nts regarding	vour reci	ruitment
		e overall.		ing statemen	nto regarding	, your roo	ditinont
-					•		
			Strongly	Disagree	Neither	Agree	Strongly
			Disagree		Agree nor Disagree		Agree
	l was a	able to learn more about the	0	0	0	0	0

To learn about the fellowship selection process

O To learn more about professional advancement opportunities

4. Which of the following best describes your current academic/professional status?

O To learn more about joining the U.S. Public Health Service Commissioned Corps

To learn about the fellowship curriculaTo hear from CDC fellows and alumni

0 In undergraduate degree program

o In master's degree program

fellowship/program through the webinar.

O Graduated from an undergraduate program

O Graduated from a master's degree program

o Other (please specify)

The webinar speakers were informative.	0	0	0	0	0
The webinar answered my questions about the	0	0	0	0	0
fellowship/program. The webinar was useful in deciding if I am a good	0	0	0	0	0
fit for the fellowship/program.					
Overall, I was satisfied with the webinar.	0	0	0	0	0

8. If you selected "disagree" or "strongly disagree" to any of the items above, please explain. [Open-Ended Question]

- 9. After attending the webinar, how likely are you to recommend this fellowship/program to a peer?
 - 0 Very unlikely
 - o Unlikely
 - 0 Neither likely nor unlikely
 - o Likely
 - o Very likely
- 10. What was the most helpful part of the webinar? [Open-Ended Question]
- 11. What suggestions do you have to improve future webinars? [Open-Ended Question]
- 12. After attending the webinar, how likely are you to apply for the fellowship/program in the future?
 - o Very Unlikely
 - **o** Unlikely
 - o Neither likely nor unlikely
 - o Likely
 - o Very likely
- 13. To what extent has your perception of the program improved after attending the webinar?
 - O Not improved at all
 - o Somewhat improved
 - 0 Improved
 - o Greatly improved
- 14. Would you like to be included in future CDC fellowship recruitment events (e.g., webinars, newsletters)?
 - O Yes [if yes, skip to question 15]
 - O No [if yes, skip to question 16]

PAGE 5. CONTACT INFORMATION (OPTIONAL)

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Top of Form

15. Please provide your contact information (e.g., full name, email) to be included in future CDC fellowship recruitment events. [Open-Ended Question]

PAGE 6. OTHER COMMENTS

To return to a previous page, use the "Previous" button at the bottom of the page (**NOT** the "Back" button in your browser). To advance, use the "Next" button at the bottom of the page.

16. Please provide any other comments that you have about the webinars or the fellowship/program recruitment in general. [Open-Ended Question]

PAGE 7. DEMOGRAPHIC INFORMATION

To return to a previous page, use the "Previous" button at the bottom of the page (**NOT** the "Back" button in your browser). To advance, use the "Next" button at the bottom of the page.

Top of FormThe following questions are completely voluntary. You may choose to leave these questions blank. Responses will only be presented in aggregate, and no identifying information will be linked to individual responses.

17. What is your race and/or ethnicity?

Select all that apply.

American Indian or Alaska Native

For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.

o Asian

For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.

o Black or African American

For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

o Hispanic or Latino

For example, Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.

o Middle Eastern or North African

For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.

o Native Hawaiian or Pacific Islander

For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fiijan, Marshallese, etc.

o White

For example, English, German, Irish, Italian, Polish, Scottish, etc.

18. Are you:

Mark all that apply.

- o Female
- o Male
- O Transgender, non-binary, or another gender
- O Prefer not to answer

19. Which of the following how you think of yourself?

- O Gay or lesbian
- O Straight, that is not gay or lesbian
- o Bisexual

- O I use a different term [free text]
- o I don't know
- o Prefer to to answer

CONCLUSION

Thank you for your time and feedback! We appreciate your responses. If you have questions about the survey, please contact [EMAIL].

More information about CDC fellowship and training opportunities can be found here (https://www.cdc.gov/fellowships).

Please click "Done" to submit.