

**Change Request**  
**OMB Control Number 0920-0765**  
**Fellowship Management System**  
**Date Submitted: [12/15/2023]**

**Summary of Request**

CDC requests OMB approval for non-substantive changes to the electronic Fellowship Management System (FMS). Changes are proposed to improve question clarity, improve relevance of response options, and streamline question logic. There are no changes to the currently approved estimates for the number of responses, burden per response, or total burden hours.

**Purpose and Organization of the FMS**

CDC uses FMS to collect, process, and manage data for 11 CDC fellowship programs (**Table A**). Information is collected from applicants who seek training or public health support services through CDC fellowships, individuals who provide references for applicants, sites that host fellows, and fellowship alumni. The FMS is comprised of 4 modules with specialized functionality: the Fellowship Application module, the Host Site Application module, the Activity Tracking module, and the Alumni Directory. Through Revisions and Change Requests, CDC adapts the FMS to changes in fellowship opportunities and content, to improve alignment and tailoring of questions for each fellowship program's eligibility criteria, and to clarify questions and instructions according to user feedback.

**Table A: Current CDC Fellowships using FMS**

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Epidemic Intelligence Service (EIS)
Epidemiology Elective Program (EEP)
CDC Steven M. Teutsch Prevention Effectiveness (PE) Fellowship
CDC E-learning Institute (ELI)
Future Leaders in Infectious and Global health Threats (FLIGHT)
Laboratory Leadership Service (LLS)
Public Health Informatics Fellowship Program (PHIFP)
Public Health Associates Program (PHAP)
Presidential Management Fellowship (PMF)
Evaluation Fellowship Program (EFP)
Science Ambassador Fellowship (SAF)

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### Description of Changes Requested

In this Change Request, CDC describes minor changes for 2 FMS modules (the Fellowship Application module and the Host Site Application module) that update data entry for 6 fellowship programs. A summary overview is provided in **Table B**.

**Table B: Summary of Changes for the Following Modules & Fellowships** (green = yes included in this request):

Fellowship Program	Fellow Application Module	Host Site Application Module
EIS		
EEP		
PE		
ELI		
FLIGHT		
LLS		
PHIFP		
PHAP		
PMF		
EFP		
SAF		
Total Change in # of Questions	-9 questions	-2 questions

The primary purpose of these changes is to increase alignment of collection materials with program goals that have changed over the course of the transition from the FMS 2.0 software to the 3.0 Microsoft Power Platform. All programs have had student loan repayment related questions removed from the Application module due to changes in program funding.

Detailed changes to each module are listed and described in **Table D** (Fellowship Application module), and **Table E** (Host Site Application module). These tables are provided at the end of this narrative. There are no changes to the Letters of Recommendation section in this change request.

### Rationale for Change

During the transition from FMS 2.0 to 3.0 software, programs were asked to review the content of Fellowship and Host Site application modules to ensure program goals and needs were being met, and that content was ported from 2.0 to 3.0 without errors. During this review process programs also identified potential improvements to the modules. This change request is intended to maximize practicality and functionality of both modules for fellowships as they enter a new cycle of applications in the 3.0 platform.

### Description of Changes to Burden

The current burden table includes changes approved 8/24/2023 and is provided below (**Table C**). CDC determined that the additional changes proposed at this time do not alter the current burden estimates for the FMS information collections ("**ICs**") highlighted below), given that most changes are simple revisions of existing content, and there is not a substantial change in the average length or complexity of either module.

**Table C: Estimated Annualized Burden Hours (approved 8/24/2023)**

Type of respondents (Information Collection "IC" title)	Form	Number of Respondents	Number of Responses per Respondent	Average Burden per Response (in hours)	Total Burden (in hours)
Fellowship Applicants (Fellowship Applications)	FMS Application Module	5286	1	87/60	7665
Reference Letter Writers (Reference Letters for Fellowship Applicants)	FMS Application Module	7142	1	15/60	1786
Subset of FMS Fellowship Applicants** (FMS Application Writing Samples (Subset Applicants))	FMS Application Module (13.6)	220	1	30/60	110
Public Health Agency or	FMS Host Site Module	970	1	75/60	1213

Organization Staff (FMS Host Site Module)					
Public Health Agency or Organization Staff (Activity Tracking)	FMS Activity Tracking Module	555	2	30/60	555
Fellowship alumni* (FMS Alumni Directory)	FMS Alumni Directory	3484	1	37/60	2148
Total		18212			13477

### Summary of Recent Changes Requested for this ICR

Submission	Approval Date	Content of Change
June 2022 <a href="#">Revision</a> Request	3/13/2023	Moved to Microsoft Power Platform software, increase in number of respondents and total burden to reflect growth of fellowship programs.
August 2023 <a href="#">Change Request</a>	8/24/2023	Added Evaluation Fellowship Program to FMS, removal of PMR/F and PH-TIPP from FMS, update to relevant SORN. Net increase in respondents and increase in burden due to EFP size.
November 2023 <a href="#">Change Request</a>	11/8/2023	Adjustments to Application and Host Site module content to improve question clarity, improve relevance of response options, and streamline question logic.
December 2023 Change Request (Current Request)		Adjustments to Application and Host Site module content to improve question clarity, improve relevance of response options, and streamline question logic. Removal of student loan repayment content.

**TABLE D: FELLOWSHIP APPLICATION MODULE**

Program	Type of Change	Sec.	Current Question/Item	Requested Change
All	Question Revision	7	College/University (open text response) (when respondent selects "Other")	Prompt should be "Other College/University"
EIS	Question Deactivation	13: Applicant survey	How did you connect with the person who told you about the fellowship by word of mouth?	Deactivate question for EIS
All	Question Revision	7.2	What do you want to add?	What do you need to add?

			<p>(Active U.S. Clinical License for clinical applicants only)</p> <ol style="list-style-type: none"> <li>1. Undergraduate Education</li> <li>2. Graduate Education (includes degrees in progress)</li> <li>3. Additional Coursework</li> <li>4. Active U.S. Clinical License</li> </ol>	<p>(Active U.S. Clinical License for clinical applicants only)</p> <ol style="list-style-type: none"> <li>1. Undergraduate Education</li> <li>2. Graduate Education (includes degrees in progress)</li> <li>3. Additional Coursework</li> <li>4. Active U.S. Clinical License</li> </ol>
<b>All</b>	Question Revision	8.2	<p>What do you want to add? For Volunteer Experience, please list activities outside your normal working hours/responsibilities.</p> <ol style="list-style-type: none"> <li>1. Work Experience</li> <li>2. Volunteer Experience</li> </ol>	<p>What do you need to add? For Volunteer Experience, please list activities outside your normal working hours/responsibilities.</p> <ol style="list-style-type: none"> <li>1. Work Experience</li> <li>2. Volunteer Experience</li> </ol>
<b>All</b>	Question Revision	10.2	<p>What do you want to add?</p> <ol style="list-style-type: none"> <li>1. Publications</li> <li>2. Presentations</li> <li>3. Grants</li> <li>4. Honors or Awards</li> <li>5. Monographs or Reports</li> <li>6. Research Grants</li> <li>7. Working Papers (Job Market Papers)</li> </ol>	<p>What do you need to add?</p> <ol style="list-style-type: none"> <li>1. Publications</li> <li>2. Presentations</li> <li>3. Grants</li> <li>4. Honors or Awards</li> <li>5. Monographs or Reports</li> <li>6. Research Grants</li> <li>7. Working Papers (Job Market Papers)</li> </ol>
<b>All</b>	Response Option Revision	8.3	<p>Organization Type:</p> <ol style="list-style-type: none"> <li>1. Additional education or training (including degree or residency programs, fellowships and post-doctoral research positions)</li> <li>2. Government – CDC (including contractor work)</li> <li>3. Government – non-CDC federal government (including contractor work)</li> <li>4. Government – state, tribal, local, or territorial health agency (including contractor work)</li> <li>5. Non-governmental, community, or other organization (NGO)</li> <li>6. Academia (as faculty or staff)</li> <li>7. Industry (private, non-clinical business)</li> <li>8. Clinical work</li> </ol>	<p>Organization Type:</p> <ol style="list-style-type: none"> <li>1. Additional education or training (including degree or residency programs, fellowships and post-doctoral research positions)</li> <li>2. Government – CDC (including contractor work)</li> <li>3. Government – non-CDC federal government (including contractor work)</li> <li>4. Government – state, tribal, local, or territorial health agency (including contractor work)</li> <li>5. Non-governmental, community, or other organization (NGO)</li> <li>6. Academia (as faculty or staff)</li> <li>7. Industry (private, non-clinical business)</li> <li>8. Clinical work</li> <li>9. Other</li> </ol>
<b>EIS</b>	Question Addition	13.2 Applicant Survey	n/a	<p>Add question to clarify which branch of military is sponsoring application. “Name of Service” with open text box response</p>
<b>EIS</b>	Question Addition	13.2 Applicant Survey	n/a	<p>Add question for contact in specified military branch.</p>

				"Contact Information" with open text box response
<b>EIS, LLS, EEP, SAF</b>	Question Deletion	7.5 College/University	If your college/university is not listed, please contact the System Help Desk Ticket  Open text response	Delete this question, replace with instructional text and a link to the help desk
<b>PHAP</b>	Question Activation	9.4 Clinical Training	Status: 1. Certified 2. Eligible	Activate question for PHAP
<b>PHAP</b>	Question Activation	9.4 Clinical Training	Certificate of completion upload:  Upload field	Activate question for PHAP
<b>PHAP</b>	Question Activation	9.4 Clinical Training	Specialty:	Activate question for PHAP
<b>PHAP</b>	Question Activation	9.4 Clinical Training	Specify Specialty:	Activate question for PHAP
<b>All</b>	Question Deletion	12.1 Student Loan Repayment	Do you have U.S. Federal Student loans?	Delete question for all pertinent fellowships
<b>All</b>	Question Deletion	12.1 Student Loan Repayment	Before applying, were you aware of the Educational Loan Repayment Program for Health Professionals in which CDC/ATSDR recruits can receive up to \$50,000 a year in loan repayment for a minimum 2 year service agreement?	Delete question for all pertinent fellowships
<b>All</b>	Question Deletion	12.1 Student Loan Repayment	Are you interested in student loan repayment? (To learn more please visit the Educational Loan Repayment for Health Professionals information on the website)	Delete question for all pertinent fellowships
<b>All</b>	Question Deletion	12.1 Student Loan Repayment	Did the availability of this loan repayment program influence your decision to apply for this fellowship?	Delete question for all pertinent fellowships
<b>EEP</b>	Response Option Revision	13.2 Topic and subject area	Topic Area(s) Preference:  1. Obesity, nutrition, and physical activity 2. Cancer prevention and control 3. Diabetes 4. Heart disease and stroke prevention 5. Tobacco prevention and cessation 6. Other chronic disease 7. Emergency preparedness and response 8. Asthma and air pollution 9. Environmental health 10. Immunizations/vaccine preventable disease 11. Influenza 12. HIV/AIDS, or Tuberculosis	Remove response option "Other" and add ability to "Select all"

			13. STD prevention 14. Viral hepatitis 15. Foodborne diseases 16. Waterborne diseases 17. Vectorborne diseases 18. Fungal Diseases 19. One Health and zoonotic disease 20. Arctic Investigations (Alaska) 21. Healthcare-associated infections 22. Quarantine and border health services 23. Unintentional injury 24. Opioid/prescription drug overdose prevention 25. Occupational health and safety 26. Violence Prevention 27. Reproductive Health 28. Maternal and infant health 29. Blood Disorders 30. Health statistics 31. State, local, tribal, and territorial health 32. Global health 33. COVID-19 34. Other (specify)	
EEP	Response Option Revision	13.2 Topic and subject area	Specify:  *if response option "Other" is selected for above question	Delete this question for EEP
EEP	Response Option Revision	13.3: Topic and subject area	Project type preference:  1. Data collection 2. Data entry 3. Data analysis 4. Intervention/program planning 5. Intervention/program implementation 6. Intervention/program evaluation 7. Literature review 8. Scientific writing (e.g., drafting a section of a report) 9. Communications/design (e.g., developing flyers, website content) 10. Field investigation 11. Other	Remove response option "Other"
EEP	Question deactivation	11 Personal Statement	Do you have geographic constraints on where you can relocate for your fellowship/program?	Deactivate question for EEP
EEP	Question deactivation	11 Personal Statement	Understanding that there are different topical and geographical assignments, in which do you prefer to work and why?	Deactivate question for EEP
EEP	Response Option Revision	10: Publications, grants, honors, awards	What do you need to add?  1. Publications 2. Presentations 3. Grants 4. Honors or Awards	What do you need to add?  1. Publications 2. Presentations 3. Grants 4. Honors or Awards

			5. Monographs or Reports 6. Research Grants 7. Working Papers (Job Market Papers)	
<b>EEP</b>	Question deactivation	8.4 Institution Details and Location	Institution Name:	Deactivate question for EEP (these questions appear when applicants opt to add Additional Training and Skills)
<b>EEP</b>	Question deactivation	8.4 Institution Details and Location	Country:	Deactivate question for EEP (these questions appear when applicants opt to add Additional Training and Skills)
<b>EEP</b>	Question deactivation	8.4 Institution Details and Location	State/Territory:	Deactivate question for EEP (these questions appear when applicants opt to add Additional Training and Skills)
<b>EEP</b>	Question deactivation	8.4 Institution Details and Location	State/Province:	Deactivate question for EEP (these questions appear when applicants opt to add Additional Training and Skills)
<b>EEP</b>	Question deactivation	8.4 Institution Details and Location	City:	Deactivate question for EEP (these questions appear when applicants opt to add Additional Training and Skills)
<b>EEP</b>	Question deactivation	13.2 Applicant Survey	Specify (which of the following most influenced you to apply to this fellowship?)	Deactivate question for EEP
<b>EEP</b>	Question Deactivation	13.2 Applicant Survey	What other opportunities (e.g. jobs, fellowships) are you considering?	Deactivate question for EEP

**TABLE E: HOST SITE APPLICATION MODULE**

<b>Program</b>	<b>Type of Change</b>	<b>Page/ Section</b>	<b>Current Question/Item</b>	<b>Requested Change</b>
<b>PHAP</b>	Question Revision	6.3 Position Assignment Environment	Please describe any additional administrative requirements for accepting a federal assignee.	Please describe any additional administrative requirements for accepting a federal assignee (i.e. background check, immunization requirements).
<b>All Programs</b>	Question Revision	6.5 Position Assignment Location	Physical Address	Street Address
<b>EIS</b>	Question Revision	7.3 Supervisor Experience	Please outline a brief supervision plan that will ensure appropriate on-the-job training, management of the fellow's workload and performance, and support for the officer's professional and	Please outline a brief supervision plan that will ensure appropriate on-the-job training, management of the fellow's workload and performance, and support for the officer's professional and personal growth. This plan should include 1) each supervisor's role on



**TABLE E: HOST SITE APPLICATION MODULE**

Program	Type of Change	Page/Section	Current Question/Item	Requested Change
			personal growth. This plan should include 1) each supervisor's role on the team; 2) communication methods and meeting frequency with the fellow, and 3) how the team will facilitate engagement of the officer with others, including senior leadership, in the host site.	the team; 2) communication methods and meeting frequency with the associate, and 3) how the team will facilitate engagement of the officer with others, including senior leadership, in the host site.
LLS	Question Deactivation	Public Health Agency Details	Public Health Agency: (drop down list)	Deactivate question for LLS
LLS	Question addition	6.3 Position Assignment Environment	n/a	Please provide the name of your Public Health Agency and the laboratory that would be hosting LLS fellow.  Open text box
LLS	Response Option Revision	6.3 Position Assignment Environment	Select the following to confirm that you have:  1. Scheduled meeting with the LLS Program 2. PD Approved by CIO Authority	Select the following to confirm that you have:  1. Scheduled meeting with the LLS Program 2. Position Description Approved by CIO Authority
LLS	Question deactivation	7.2 Supervisor Information	Supervisor Employed By: Open Text Field	Deactivate this question for LLS
PHAP	Question Activation	6.2 Position Assignment Details	Proposed initial project(s): Open text response	Activate this question for PHAP
EFP	Question deletion	6.15 EFP Program Funding	The CDC Evaluation Fellowship is intended to be two years. Which describes your programs ability to host the Evaluation Fellow?  -Full cost of hosting the fellow for the two years -Other	Delete this question
EEP	Question deletion	6.9 Position assignment details	Additional Details: Open Text response	Delete this question