

U.S. NATIONAL SCIENCE FOUNDATION RESEARCH TRAINEESHIP (NRT) PROGRAM

PI Instrument

Version: Draft

Prepared by CBS and NSF

This instrument is filled out by the Principal Investigator (PI).

The public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, gathering data to answer the questions, and responding to the questions. An agency may not conduct or sponsor a collection of information unless it displays a currently valid OMB number, nor may it collect individuals' responses unless the number is displayed. The burden number for this collection is 3145-0263. Send comments regarding this data collection or burden estimate to Suzanne H. Plimpton, Reports Clearance Officer, National Science Foundation, 401 Dulany Street, Alexandria, Virginia 22314; telephone (703) 292-7556; or send an email to splimpto@nsf.gov.

1 Table of Contents

1	TABLE OF CONTENTS.....	2
2	CONVENTIONS IN THIS DOCUMENT.....	3
3	PRINCIPAL INVESTIGATOR INSTRUMENT.....	6
3.1	NAME AND CONTACT INFORMATION.....	6
3.2	DEMOGRAPHICS.....	9
3.3	PRODUCTS.....	13

1.

2 Conventions in this document

The conventions described below are an attempt to render dynamic UI elements and interactive content and behaviors in this static word document.



Radio Button (select one in the group)



Checkbox (select any in the group)

Textbox (enter text)

Option 1
Option 2
Option 3

Dropdown box (Select one)

A search box that will narrow the results as the user types, e.g., states and countries

When the user selects the control a date picker will appear. They can also enter the date via the keyboard.

As the user types a list of matching values will appear in a dropdown list. The user can click on an entry in the list, and it will be added to the textbox in a pill format. If the string of characters is new the user can hit tab/enter and the new value will also turn into a pill.

× Alaska

Same as Single Add but the user will then be able to enter further values. This is an example:



[Button]

A button that performs an action. Added for context around managing lists and final submit

<Information>

Text in angle brackets is inserted by the system and is read-only.

[Read only]

These data are read-only and can only be changed by contacting support.

[Read only after first year]

The data are read-only after the first year. After the first year these data can only be changed by contacting support

[Preloaded]

These data are pre-loaded at the beginning of the reporting period.

[Copied]

These data are copied from the previous year when preparing for a new reporting period.

[Change management]

These data are subject to other rules when they change.

{Skip Ref A-Z}

Indicates that a response to this question affects other questions after it.

{Skip when A-Z}

Indicates that the question should be

skipped if the skip reference meets a
certain criterion

This is instructional text

Instructions to the respondents

DRAFT

3 Principal Investigator Instrument

3.1 Name and Contact Information

3.1.1 First Name

Required

Limit 50 characters

[Prefilled]

[Read only]

[Change management]

3.1.2 Middle Initial or Name

[Prefilled]

[Read only]

[Change management]

3.1.3 Last Name

Required

Limit 50 characters

[Prefilled]

[Read only]

[Change management]

3.1.4 Email Address

Required

Limit 200 characters

[Prefilled]

[Read only]

[Change management]

NRT PI Instrument

3.1.5 Institution Name

[Prefilled]

[Read only]

Institution 1

3.1.6 Title

Required

[Copied]

Professor
Associate Professor
Assistant Professor
Instructor
Other <i>{Skip Ref A}</i>

3.1.7 If other title, please specify:

Limit 100 characters

{Skip if A is not "Other"}

[Copied]

--

3.1.8 Department at Institution

Required

Limit 200 characters

[Copied]

--

3.1.9 Institution's City

Required

Limit 200 characters

[Copied]

--

NRT PI Instrument

3.1.10 Institution's State

Required

[Copied]

Searchable dropdown containing all states

3.1.11 ZIP Code

Required

Limit 5 characters

[Copied]

3.1.12 Phone (xxx-xxx-xxxx)

Required

Limit 10 characters

[Copied]

3.1.13 Extension

Limit 5 characters

[Copied]

3.1.14 NRT Program Website (if applicable)

Limit 200 characters

[Copied]

☐ I approve making the Program Website listed above for use on <https://new.nsf.gov/funding/initiatives/nrt>, viewable by the general public.

(Optional)

3.1.15 ORCID

[Copied]

3.1.16 Personal or Professional Profile/Presence Online (LinkedIn or similar preferred)

[Copied]

3.2 Demographics

3.2.1 What is your race and/or ethnicity?

Select all that apply and enter additional details in the spaces below.

[Copied]

☐ American Indian or Alaska Native – Enter, 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.

.

☐ Asian –Provide details below.

- Chinese
- Asian Indian
- Filipino
- Vietnamese
- Korean
- Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

☐ Black or African American –Provide details below.

- African American
- Jamaican
- Haitian
- Nigerian
- Ethiopian
- Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese,

etc.

☐ Hispanic or Latino –Provide details below.

- Mexican
- Puerto Rican
- Salvadoran
- Cuban
- Dominican
- Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

☐ Middle Eastern or North African –Provide details below.

- Lebanese
- Iranian
- Egyptian
- Syrian
- Iraqi
- Israeli

Enter, for example Moroccan, Yemeni, Kurdish, etc.

☐ Native Hawaiian or Pacific Islander –Provide details below.

- Native Hawaiian
- Samoan
- Chamorro
- Tongan
- Fijian
- Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

☐ White –Provide details below.

- English

NRT PI Instrument

- German
- Irish
- Italian
- Polish
- Scottish

Enter, for example, French, Swedish, Norwegian, etc.

☐ I prefer not to answer

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

Required

[Copied]

- ☐ Male
- ☐ Female
- ☐

3.2.3 Disability Status

Select one.

Required

[Copied]

Yes (Check yes if any of the following apply):

Deaf or serious difficulty hearing

Blind or serious difficulty seeing even when wearing glasses

☐ Serious difficulty walking or climbing stairs

Difficulty dressing or bathing

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

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

- ☐ No
- ☐ I prefer not to answer

3.2.4 Veteran Status: Are you now on full-time active duty with the U.S. Armed Forces? Have you ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard?

Note: A veteran is a person who served in the active military, naval, or air service and who was discharged or released under conditions other than dishonorable (Title 38 of the Code of Federal Regulations)

Select one.

Required

[Copied]

- ☐ Yes (Check "Yes" if you can answer yes to either of the above questions.)
- ☐ No
- ☐ I prefer not to answer

3.3 Products

The products are defined in the NRT Instrument – Project.docx file. Please comment on them in there.

PI will enter their own products and/or import them from the ORCID database. The PI/PC will curate the final list of products for the project.

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