EIAP Scholar Satisfaction Survey Screenshots

Overview

This document contains screenshots of each page within the survey titled "EIAP Overall Program Satisfaction – Scholars". The page header containing the survey title is repeated on each page. To save space in this document, the header is omitted from Figures 2 – 19. The OMB number and expiration date are displayed at the top of the survey launch page (Figure 1), before the respondent accesses the first question in the survey.

Page Screenshots

OMB No.: 0925-0642
Expiration Date: 03/31/2023

Public reporting burden for this collection of information is estimated to average 5 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 (0925-0642). Do not return the completed form to this address.

EIAP Overall Program Satisfaction - Scholars

Thank you for taking the time to provide feedback regarding your experience with EIAP. The information you provide will remain secure to the extent permitted by law. Your responses are not associated with your name. Responses will be used to make improvements to the program as appropriate and possible. If you have any questions, you may contact Dan Eckstein, program analyst at Daniel.Eckstein@nih.gov.

By continuing with this survey, you agree to participate in providing feedback related to your EIAP Overall Program Satisfaction as an EIAP Scholar.

Click here to launch the *EIAP Overall Program Satisfaction - Scholars* Survey

Figure 1. Survey launch page, with OMB information.

Grantsmanship Training

The Grant Writing Seminar (2- 1/2-day trainings in March) strengthened my grant writing skills.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

Next Question

Figure 2. Grantsmanship Training - Question 1

The Grant Writing Workshop (1/2-day mock review and 30 minutes one-on-one with Dr. Robertson in May) strengthened my grant writing skills.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

Previous Question   Next Question

Figure 3. Grantsmanship Training - Question 2

The Mentored Mock Review (in July 2022) strengthened my grant writing skills.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

Previous Question   Next Question

Figure 4. Grantsmanship Training - Question 3

How can we improve the Grantsmanship component of EIAP?

○ Prefer not to Answer

[Previous Question]   [Next Question]

Figure 5. Grantsmanship Training - Question 4

Professional Advancement Virtual Engagement Series (PAVES)! Monthly Webinars

Participating in the monthly PAVES webinar series added value to my EIAP experience.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

[Previous Question]   [Next Question]

Figure 6. PAVES - Question 1

Professional Advancement Virtual Engagement Series (PAVES)! Monthly Webinars

Are there additional topics you would like to see covered?

○ Prefer not to Answer

[Previous Question]   [Next Question]

Figure 7. PAVES - Question 2

Mentorship Experience

The EIAP-matched mentors enhanced my overall EIAP experience.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

[Previous Question]   [Next Question]

Figure 8. Mentorship Experience - Question 1

I intend to continue my relationship with the EIAP-matched mentor.

○ Yes
○ No

○ Prefer not to Answer

[Previous Question]   [Next Question]

Figure 9. Mentorship Experience - Question 2

Why do you intend to discontinue your relationship with the EIAP-matched mentor?

○ Prefer not to Answer

[Previous Question]   [Next Question]

Figure 10. Mentorship Experience - Question 2 – Follow-up (if Q2 = No)

In what ways could your mentor experience be improved?

Prefer not to Answer

Previous Question | Next Question

Figure 11. Mentorship Experience - Question 3a (if Q2 = No)

In what ways has your mentor enhanced your experience?

Prefer not to Answer

Previous Question | Next Question

Figure 12. Mentorship Experience - Question 3b (if Q2 = Yes)

EIAP Management Experience

I felt supported by the EIAP management team.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

Previous Question | Next Question

Figure 13. EIAP Management Experience - Question 1

How can the Management Team improve the Program?

○ Prefer not to Answer

Previous Question   Next Question

Figure 14. EIAP Management Experience - Question 2

I would recommend the EIAP program to a friend or colleague.

○ Strongly Agree
○ Agree
○ Disagree
○ Strongly Disagree

○ Prefer not to Answer

Previous Question   Next Question

Figure 15. EIAP Program Experience - Question 1

What aspect of EIAP was of most value to you?

○ Prefer not to Answer

Previous Question   Next Question

Figure 16. EIAP Program Experience - Question 2

What aspect of EIAP was of least value to you?

Prefer not to Answer

Previous Question   Next Question

Figure 17. EIAP Program Experience - Question 3

Please provide any other feedback you feel would improve the program or that program staff should know.

Prefer not to Answer

Previous Question   Submit

Figure 18. Additional Feedback

Survey Complete!

Thank you for completing the survey! Your responses have been saved.

May we contact you to discuss this program in more detail?

If so, please provide your contact information below. Your survey data have been saved to a secure database that will not include your contact information. If you agree to be contacted, your name and email address will be sent by email to the EIAP mailbox so that someone from the Program may follow up with you.

Name: [   ]
Email Address: [   ]

Sumbit Contact Information

If not, you may close your browser window now.

Figure 19. Survey Complete Screen – Collects information for follow-up interview