

## CPFP Fall Symposium Registration

Thank you for your interest in attending the CPFP Fall Symposium being hosted in-person at the NCI Shady Grove campus on September 16, 2024. Registration is required in advance to join the event.

**In-Person registration will close on Tuesday, September 3, 2024.**

OMB No.: 0925-0740

Expiration Date: 9/30/2025

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 (0925-0740). Do not return the completed form to this address

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1. First name\*:

2. Last name\*:

3. Email & Confirm Email\* address fields:

4. Institution/Center/ Agency/Division (current affiliation)\*:

5. Are you a U.S. Citizen, NIH Badge Holder, or Permanent Resident with a green card?\*

- ☐ Yes
- ☐ No (link to VAMI form)

6. Please indicate which events you plan to attend (check all that apply): *(multiple choice)*

- ☐ Morning keynote lectures and presentations
- ☐ Lunch
- ☐ Afternoon networking/career sessions
- ☐ Networking session (off campus/after the symposium?)

7. I will be attending as a (select all that apply) \*: *(multiple choice)*

- ☐ Current CPF
- ☐ Former CPF
- ☐ Presenter
- ☐ DCP/CPFP leadership and/or staff
- ☐ Other (specify) \_\_\_\_\_

8. Request for reasonable accommodations?\* *(single choice)*

- ☐ No
- ☐ Yes (please specify) \_\_\_\_\_

9. I'd like to be included in the participant directory for this event\*: *(single choice)*

- ☐ Yes
- ☐ No

If select "Current CPF" continue to Q10-Q12

If select "Former CPF" skip to Q13-Q16

If selected "Presenter", "DCP/CPFP leadership or staff", or "Other" skip to Q14-Q16

10. Year Onsite *(single choice)*

- ☐ 1<sup>st</sup>
- ☐ 2<sup>nd</sup>
- ☐ 3<sup>rd</sup>
- ☐ ≥4<sup>th</sup>

11. What are your research interests? List **3-5** key words *(free text)*

12. Select your **top two** career fields: *(multiple choice of 2)*

- ☐ Government
- ☐ Industry
- ☐ Academia
- ☐ Non-profit
- ☐ Research institute/center
- ☐ Other: (specify)

13. When you were a CPF, in which division(s)/research program(s)/center(s) were you affiliated with?  
*(free text)*

14. Please select your current industry/job field: *(multiple choice)*

- ☐ Government
- ☐ Industry
- ☐ Academia
- ☐ Non-profit
- ☐ Research institute/center
- ☐ Other: (specify)

15. What is your current job title? *(free text)*

16. Would you be interested in participating in the afternoon career roundtable or panel session with current fellows?\* *(single choice)*

- ☐ Yes
- ☐ No