

Data Collection Tools

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1. Entrance Survey for Graduate Students

OMB# 0925-0718 EXP. DATE: 05/31/2018

Public reporting burden for this collection of information is estimated to average 20 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-XXXX). Do not return the completed form to this address.

SECTION 1. INTRODUCTION

This survey is part of a long-term study by the NIH to measure the effect of career development activities on graduate students and postdoctoral scientists. We appreciate your participation in this survey. Your responses will help improve biomedical research training programs both at your institution and nationwide, and your continued participation is vital to the success of this study.

We would like to invite you to continue sharing your experiences and insights by participating in surveys after you exit your institution. Please provide your email address(es) below to receive future surveys.

Primary Email Address (i.e., personal or non-institutional): _____

Secondary Email Address (i.e., personal or non-institutional): _____

SECTION 2. PARTICIPATION IN CAREER DEVELOPMENT ACTIVITIES

1. In the past 12 months, which of the following have you done as a part of your career development?

	Yes	No	I do not remember
a. Held an internship within your institution			
b. Held an internship outside your institution			
c. Job shadowing (not as a part of an internship)			
d. Sought career advice from your PI/thesis advisor			
e. Sought career advice from a faculty member (other than your PI/thesis advisor), a staff member, or professional counselor at your institution			
f. Discussed career plans with professionals outside of academia			
g. Read books, articles, and/or online sources about career development or planning			
h. Discussed career plans with family			
i. Attended a course about career planning for credit			
j. Attended a course about career planning not for credit			
k. Attended a career-related event at your institution (e.g., workshop, panel, career fair, seminar, etc.)			
l. Attended a career-related event NOT at your institution (e.g., workshop, panel, career fair, seminar, etc.)			
m. Other (please specify): _____			

2. Please comment on: (1) The specific knowledge and/or skills that you gained from participating in career development activities (2) How you have used the knowledge and/or skills _____

SECTION 3. UNDERSTANDING OF CAREER PATHS

3. How confident are you that you can do the following?

Items	5 Completely confident	4 Highly confident	3 Moderately confident	2 Minimally confident	1 Not at all confident
a. Assess your abilities to pursue your desired career path(s)					
b. Determine the steps to pursue your desired career path(s)					
c. Seek advice from professionals in your desired career path(s)					
d. Identify potential employers, firms, and institutions relevant to your desired career path(s)					
e. Achieve your career goals					

Below is a list of career paths commonly followed by Ph.D.-level scientists. These career paths are from the [my Individual Development Plan \(myIDP\)](#), a career planning tool that helps graduate students identify and pursue long-term goals. Please review the descriptions in the Career Path Table below to help answer questions about these career paths. [Note to programmer: Insert hyperlink into “Individual Development Plan (myIDP)” using: <http://myidp.sciencecareers.org>]

Career Path Table

Career Paths	Description
a. Principal investigator in a research-intensive institution	Independent researcher at a medical school, private research institute, government lab or university with minimal teaching responsibilities.
b. Research in industry	Discovery or preclinical researcher; manager of a research team or facility.
c. Research staff in a research-intensive institution	Staff scientist or researcher in academia or government, lab manager, director of a multi-user research facility in an academic institution.
d. Combined research and teaching careers	Faculty at a liberal arts college or university whose job includes both research and major teaching responsibilities.
e. Teaching-intensive careers in academia	A primarily teaching faculty position in a research university, liberal arts college, community college.
f. Science education for K-12 schools	Classroom teacher; curriculum developer; science specialist.
g. Science education for non-scientists	Education or public outreach specialist such as at a science museum or scientific society.
h. Clinical practice	Clinician such as genetics counselor, therapist, physician.
i. Public health related careers	Public health program analyst or evaluator; epidemiologist; biostatistician; medical informaticist.
j. Scientific/medical testing	Testing specialist in an environmental, public health, genetics, or forensic science setting (intelligence agencies, federal/state departments of justice); clinical diagnostician.
k. Science writing	Science, medical, or technical writer or journalist; science editor; science publisher.
l. Research administration	Research administrator in private or public research institutions, government or academia, including compliance officers, grants and contracts officers; dean or director of research programs.
m. Science policy	Public affairs/government affairs staff at scientific societies, foundations, government entities, or think tanks.
n. Intellectual property	Patent agent; patent attorney; technology transfer specialist.
o. Business of science	Management consultant; business development professional in a biotech company; venture capitalist; market researcher; investment analyst.
p. Entrepreneurship	Starting your own business.
q. Sales and marketing of science-related products	Medical science liaison; technical sales representative; marketing specialist.
r. Support of science-related products	Technical support specialist; field application specialist; product development scientist or engineer.

Career Paths	Description
s. Drug/device approval and production	Regulatory affairs professional; quality control specialist.
t. Clinical research management	Clinical research project/trials manager or coordinator.
Other options -- not included in the my Individual Development Plan (myIDP):	
u. Career that is not related to science	
v. Other	

4. Which statement best describes your familiarity with the 20 career paths from the my Individual Development Plan (myIDP) shown in the Career Path Table?

- I am familiar with all of these career paths
- I am familiar with most of these career paths (between 13 and 19)
- I am familiar with some of these career paths (between 7 and 12)
- I am familiar with a few of these career paths (between 1 and 6)
- I am not familiar with any of these career paths

5. Based on the list of career paths, to what extent are you currently considering the following?

Career Paths	5 Will definitely pursue	4 Strongly considering	3 Moderately considering	2 Slightly considering	1 Not at all considering	Not familiar enough to decide
a. Principal investigator in a research-intensive institution						
b. Research in industry						
c. Research staff in a research-intensive institution						
d. Combined research and teaching careers						
e. Teaching-intensive careers in academia						
f. Science education for K-12 schools						
g. Science education for non-scientists						
h. Clinical practice						
i. Public health related careers						
j. Scientific/medical testing						
k. Science writing						
l. Research administration						
m. Science policy						
n. Intellectual property						
o. Business of science						
p. Entrepreneurship						
q. Sales and marketing of science-related products						
r. Support of science-related products						
s. Drug/device approval and production						
t. Clinical research management						
u. Career that is not related to science (please specify): _____						
v. Other (please specify): _____						

6. How influential are the following factors in your choice of career path(s)?

Career Path Factors	5 Extremely influential	4 Very influential	3 Moderately influential	2 Slightly influential	1 Not at all influential
a. Professional satisfaction					
b. Geographic location					
c. Work-life balance					
d. Family concerns					
e. Salary level					
f. More job openings					
g. Opportunities for advancement					
h. Availability of funding for research					
i. Current PI/thesis advisor advice					
j. Other (please specify): _____					

SECTION 4. SUPPORT FOR PURSUING DESIRED CAREER PATHS

7. To what extent do you agree with the following statements? (Note: For first year students, some statements may be “Not Applicable”)

Statements	5 Strongly agree	4 Agree	3 Neutral	2 Disagree	1 Strongly disagree	Not applicable
a. I am getting the training I need for my desired career path(s)						
b. I am encouraged by my graduate program/department to pursue my career goals						

8. Do you have a PI/thesis advisor?

- a. Yes
- b. No (*Go to Q12*)

9. How confident are you to discuss your career goals with your PI/thesis advisor?

- a. Completely confident
- b. Highly confident
- c. Moderately confident
- d. Minimally confident
- e. Not at all confident

10. In the past 12 months, how often have you discussed your career goals with your PI/thesis advisor?

- a. Weekly
- b. Monthly
- c. Quarterly
- d. Semiannually
- e. Annually
- f. Never

11. Considering your interactions with your PI/thesis advisor, to what extent do you agree with the following statements?

PI/Thesis Support	5 Strongly agree	4 Agree	3 Neutral	2 Disagree	1 Strongly disagree	I do not know
a. I am encouraged by my PI/thesis advisor to pursue career development activities toward my career goals						
b. I am encouraged by my PI/thesis advisor to pursue my career goals						

12. In the past 12 months, how often have you discussed your career goals with the following?

Individuals	Weekly	Monthl y	Quarterl y	Semiannuall y	Annually	Never
a. Faculty (other than your PI/thesis advisor), staff member, or other professional from your institution						
b. A professional outside your institution whom you consider a mentor						
c. Peers						
d. Family members						

13. In the past 12 months, have you completed an Individual Development Plan?

- a. Yes
- b. No (*Go to Q17*)
- c. I do not know/I do not remember (*Go to Q17*)

14. How valuable was the Individual Development Plan to you?

- a. Extremely valuable
- b. Very valuable
- c. Moderately valuable
- d. Slightly valuable
- e. Not at all valuable
- f. I do not know/I do not remember

15. [*If Q8=Yes and Q13=Yes*] Did you discuss your Individual Development Plan with your PI/thesis advisor?

- a. Yes
- b. No
- c. I do not know/I do not remember

16. Please provide any comments about your experience with the Individual Development Plan: _____

SECTION 5. IMPACT OF CAREER DEVELOPMENT ACTIVITIES

17. Have you participated in any of the career development activities offered by the [*insert name of school's specific BEST program name (Example: ASPIRE)*] program? [*Optional note for programmer: school specific example activities may be inserted here*]

- a. Yes
- b. No (*Go to Q20*)
- c. I do not know/I do not remember (*Go to Q20*)

18. Considering the career development activities you have participated in, how helpful was the [insert name of school's specific BEST program name (Example: ASPIRE)] program in providing:

Statements	5 Extremely helpful	4 Very helpful	3 Moderately helpful	2 Slightly helpful	1 Not at all helpful
a. Information about a wide range of careers					
b. Working knowledge of the skills necessary for a wide range of careers					
c. Resources (e.g., online videos, courses, etc.) to pursue a wide range of careers					
d. Exposure to a network of professionals from a wide range of careers					
e. Information to assist in making career decisions					

19. What [insert name of school's specific BEST program name (Example: ASPIRE)] program activities or events most influenced your career development? Please comment on why these were influential. Examples of career development activities include workshops, seminars, internships, courses, etc. [Optional note for programmer: these general example activities may be replaced with school specific example activities]

20. Did you participate in career development activities other than the ones provided by the [insert name of school's specific BEST program name (Example: ASPIRE)] program?

- a. Yes
- b. No (Go to Q22)
- c. I do not know/I do not remember (Go to Q22)

21. Please describe the activities, events, and/or resources that were NOT part of the [insert name of school's specific BEST program name (Example: ASPIRE)] program that most influenced your career development. _____

SECTION 6. PUBLICATIONS

22. Have you been an author on an article that was published in a peer-reviewed journal (include publications before and during Ph.D. program)?

- a. Yes
- b. No (Go to Q26)

23. What is your total number of articles published in peer-reviewed journals? _____

24. Since entering your current graduate program/department, how many of your articles have been published in peer-reviewed journals? _____

25. Since entering your current graduate program/department, how many first author publications do you have in peer-reviewed journals? _____

SECTION 7. BACKGROUND AND DEMOGRAPHIC INFORMATION

26. What is the highest educational level of either of your parents/guardians? *(optional)*
- a. Less than High School
 - b. High School
 - c. Some College
 - d. Associate's Degree
 - e. Bachelor's Degree
 - f. Master's Degree
 - g. Professional Degree (e.g., Law, Medicine, Dentistry)
 - h. Ph.D. or other doctoral degree
27. What graduate degree(s), if any, do you have? *(Check all that apply)*
- a. Ph.D. (or equivalent)
 - b. Medical (or equivalent)
 - c. D.V.M. (or equivalent)
 - d. M.S., M.A., or M.B.A.
 - e. Other type of master's or professional degree(s) (please specify): _____
 - f. None
28. What is the name of your graduate program/department? _____
29. Is your graduate program/department in your institution's medical school?
- a. Yes
 - b. No
- 30a. In what month did you receive your undergraduate degree? *[drop down list]*
- 30b. In what year did you receive your undergraduate degree? *[drop down list]*
- 31a. In what month did you start your Ph.D. program? *[drop down list]*
- 31b. In what year did you start your Ph.D. program? *[drop down list]*
32. What year are you in your Ph.D. program?
- a. 1st year
 - b. 2nd year
 - c. 3rd year
 - d. 4th year
 - e. 5th year
 - f. 6th year or more
- 33a. In what month do you expect to graduate? *[drop down list]*
- 33b. In what year do you expect to graduate? *[drop down list]*
34. Which of the following best describes your ethnicity? *(optional)*
- a. Hispanic or Latino
 - b. Not Hispanic or Latino
35. Which of the following describes your race? (Please check all that apply) *(optional)*
- a. American Indian or Alaska Native
 - b. Asian
 - c. Black or African American

- d. Native Hawaiian or other Pacific Islander
- e. White

36. What is your citizenship status? *(optional)*

- a. US citizen since birth
- b. Naturalized US citizen
- c. Non-US citizen with permanent resident visa (green card)
- d. Non-US citizen with temporary US visa

37. What is your gender? *(optional)*

- a. Male
- b. Female

38. In what year were you born? *(optional)* *[drop down list]*

2. Entrance Survey for Postdoctoral Scientists

OMB# 0925-0718 **EXP. DATE:** 05/31/2018

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SECTION 1. INTRODUCTION

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We would like to invite you to continue sharing your experiences and insights by participating in surveys after you exit your institution. Please provide your email address(es) below to receive future surveys.

Primary Email Address (i.e., personal or non-institutional): _____

Secondary Email Address (i.e., personal or non-institutional): _____

SECTION 2. PARTICIPATION IN CAREER DEVELOPMENT ACTIVITIES

1. In the past 12 months, which of the following have you done as a part of your career development?

	Yes	No	I do not remember
a. Held an internship within your institution			
b. Held an internship outside your institution			
c. Job shadowing (not as a part of an internship)			
d. Sought career advice from your PI			
e. Sought career advice from a faculty member (other than your PI), a staff member, or professional counselor at your institution			
f. Discussed career plans with professionals outside of academia			
g. Read books, articles, and/or online sources about career development or planning			
h. Discussed career plans with family			
i. Attended a course about career planning for credit			
j. Attended a course about career planning not for credit			
k. Attended a career-related event at your institution (e.g., workshop, panel, career fair, seminar, etc.)			
l. Attended a career-related event NOT at your institution (e.g., workshop, panel, career fair, seminar, etc.)			
m. Other (please specify): _____			

2. Please comment on: (1) The specific knowledge and/or skills that you gained from participating in career development activities (2) How you have used the knowledge and/or skills _____

SECTION 3. UNDERSTANDING OF CAREER PATHS

3. How confident are you that you can do the following?

Items	5 Completely confident	4 Highly confident	3 Moderately confident	2 Minimally confident	1 Not at all confident
a. Assess your abilities to pursue your desired career path(s)					
b. Determine the steps to pursue your desired career path(s)					
c. Seek advice from professionals in your desired career path(s)					
d. Identify potential employers, firms, and institutions relevant to your desired career path(s)					
e. Achieve your career goals					
f. Discuss your career goals with your PI					

Below is a list of career paths commonly followed by Ph.D.-level scientists. These career paths are from the [my Individual Development Plan \(myIDP\)](#), a career planning tool that helps postdoctoral scientists identify and pursue long-term goals. Please review the descriptions in the Career Path Table below to help answer questions about these career paths. [Note to programmer: Insert hyperlink into “Individual Development Plan (myIDP)” using: <http://myidp.sciencecareers.org>]

Career Path Table

Career Paths	Description
a. Principal investigator in a research-intensive institution	Independent researcher at a medical school, private research institute, government lab or university with minimal teaching responsibilities.
b. Research in industry	Discovery or preclinical researcher; manager of a research team or facility.
c. Research staff in a research-intensive institution	Staff scientist or researcher in academia or government, lab manager, director of a multi-user research facility in an academic institution.
d. Combined research and teaching careers	Faculty at a liberal arts college or university whose job includes both research and major teaching responsibilities.
e. Teaching-intensive careers in academia	A primarily teaching faculty position in a research university, liberal arts college, community college.
f. Science education for K-12 schools	Classroom teacher; curriculum developer; science specialist.
g. Science education for non-scientists	Education or public outreach specialist such as at a science museum or scientific society.
h. Clinical practice	Clinician such as genetics counselor, therapist, physician.
i. Public health related careers	Public health program analyst or evaluator; epidemiologist; biostatistician; medical informaticist.
j. Scientific/medical testing	Testing specialist in an environmental, public health, genetics, or forensic science setting (intelligence agencies, federal/state departments of justice); clinical diagnostician.
k. Science writing	Science, medical, or technical writer or journalist; science editor; science publisher.
l. Research administration	Research administrator in private or public research institutions, government or academia, including compliance officers, grants and contracts officers; dean or director of research programs.
m. Science policy	Public affairs/government affairs staff at scientific societies, foundations, government entities, or think tanks.
n. Intellectual property	Patent agent; patent attorney; technology transfer specialist.
o. Business of science	Management consultant; business development professional in a biotech company; venture capitalist; market researcher; investment analyst.
p. Entrepreneurship	Starting your own business.
q. Sales and marketing of science-related products	Medical science liaison; technical sales representative; marketing specialist.

Career Paths	Description
r. Support of science-related products	Technical support specialist; field application specialist; product development scientist or engineer.
s. Drug/device approval and production	Regulatory affairs professional; quality control specialist.
t. Clinical research management	Clinical research project/trials manager or coordinator.
Other options -- not included in the my Individual Development Plan (myIDP):	
u. Career that is not related to science	
v. Other	

4. Which statement best describes your familiarity with the 20 career paths from the my Individual Development Plan (myIDP) shown in the Career Path Table?

- I am familiar with all of these career paths
- I am familiar with most of these career paths (between 13 and 19)
- I am familiar with some of these career paths (between 7 and 12)
- I am familiar with a few of these career paths (between 1 and 6)
- I am not familiar with any of these career paths

5. Based on the list of career paths, to what extent are you currently considering the following?

Career Paths	5 Will definitely pursue	4 Strongly considering	3 Moderately considering	2 Slightly considering	1 Not at all considering	Not familiar enough to decide
a. Principal investigator in a research-intensive institution						
b. Research in industry						
c. Research staff in a research-intensive institution						
d. Combined research and teaching careers						
e. Teaching-intensive careers in academia						
f. Science education for K-12 schools						
g. Science education for non-scientists						
h. Clinical practice						
i. Public health related careers						
j. Scientific/medical testing						
k. Science writing						
l. Research administration						
m. Science policy						
n. Intellectual property						
o. Business of science						
p. Entrepreneurship						
q. Sales and marketing of science-related products						
r. Support of science-related products						
s. Drug/device approval and production						
t. Clinical research management						
u. Career that is not related to science (please specify): _____						
v. Other (please specify): _____						

6. How influential are the following factors in your choice of career path(s)?

Career Path Factors	5 Extremely influential	4 Very influential	3 Moderately influential	2 Slightly influential	1 Not at all influential
a. Professional satisfaction					
b. Geographic location					
c. Work-life balance					
d. Family concerns					
e. Salary level					
f. More job openings					
g. Opportunities for advancement					
h. Availability of funding for research					
i. Current PI advice					
j. Other (please specify): _____					

SECTION 4. SUPPORT FOR PURSUING DESIRED CAREER PATHS

7. To what extent do you agree with the following statements?

Statements	5 Strongly agree	4 Agree	3 Neutral	2 Disagree	1 Strongly disagree
a. I am getting the training I need for my desired career path(s)					
b. I am encouraged by my department to pursue my career goals					

8. In the past 12 months, how often have you discussed your career goals with the following?

Individuals	Weekly	Monthly	Quarterly	Semiannually	Annually	Never
a. Your PI						
b. Faculty (other than your PI), staff member, or other professional from your institution						
c. A professional outside your institution whom you consider a mentor						
d. Peers						
e. Family members						

9. Considering your interactions with your PI, to what extent do you agree with the following statements?

PI Support	5 Strongly agree	4 Agree	3 Neutral	2 Disagree	1 Strongly disagree	I do not know
a. I am encouraged by my PI to pursue career development activities toward my career goals						
b. I am encouraged by my PI to pursue my career goals						

10. In the past 12 months, have you completed an Individual Development Plan?

- a. Yes
- b. No (*Go to Q14*)
- c. I do not know (*Go to Q14*)

11. How valuable was the Individual Development Plan to you?

- a. Extremely valuable
- b. Very valuable
- c. Moderately valuable
- d. Slightly valuable
- e. Not at all valuable
- f. I do not know/I do not remember

12. Did you discuss your Individual Development Plan with your PI?

- a. Yes
- b. No
- c. I do not know/I do not remember

13. Please provide any comments about your experience with the Individual Development Plan:

SECTION 5. IMPACT OF CAREER DEVELOPMENT ACTIVITIES

14. Have you participated in any of the career development activities offered by the *[insert name of school's specific BEST program name (Example: ASPIRE)]* program? *[Optional note for programmer: school specific example activities may be inserted here]*

- a. Yes
- b. No *(Go to Q17)*
- c. I do not know/I do not remember *(Go to Q17)*

15. Considering the career development activities you have participated in, how helpful was the *[insert name of school's specific BEST program name (Example: ASPIRE)]* program in providing:

Statements	5 Extremely helpful	4 Very helpful	3 Moderately helpful	2 Slightly helpful	1 Not at all helpful
a. Information about a wide range of careers					
b. Working knowledge of the skills necessary for a wide range of careers					
c. Resources (e.g., online videos, courses, etc.) to pursue a wide range of careers					
d. Exposure to a network of professionals from a wide range of careers					
e. Information to assist in making career decisions					

16. What *[insert name of school's specific BEST program name (Example: ASPIRE)]* program activities or events most influenced your career development? Please comment on why these were influential. Examples of career development activities include workshops, seminars, internships, courses, etc. *[Optional note for programmer: these general example activities may be replaced with school specific example activities]*

17. Did you participate in career development activities other than the ones provided by the *[insert name of school's specific BEST program name (Example: ASPIRE)]* program?

- a. Yes
- b. No *(Go to Q19)*
- c. I do not know/I do not remember *(Go to Q19)*

18. Please describe the activities, events, and/or resources that were NOT part of the [insert name of school's specific BEST program name (Example: ASPIRE)] program that most influenced your career development. _____

SECTION 6. PUBLICATIONS

19. Have you been an author on an article that was published in a peer-reviewed journal?

- a. Yes
- b. No (Go to Q22)

20. How many of your articles have been published in peer-reviewed journals? _____

21. How many first author publications do you have in peer-reviewed journals? _____

SECTION 7. FINANCIAL SUPPORT

22. Do you receive financial support from your PI's funding source(s)?

- a. Yes
- b. No (Go to Q25)
- c. I do not know/I do not remember (Go to Q25)

23. What kind of influence do you think this has on your PI's attitude toward your participation in career development activities?

- a. Very positive
- b. Somewhat positive
- c. Neither positive nor negative
- d. Somewhat negative
- e. Very negative
- f. I do not know/I do not remember

24. Please provide any comments: _____

SECTION 8. BACKGROUND AND DEMOGRAPHIC INFORMATION

25. What is the highest educational level of either of your parents/guardians? (optional)

- a. Less than High School
- b. High School
- c. Some College
- d. Associate's Degree
- e. Bachelor's Degree
- f. Master's Degree
- g. Professional Degree (e.g., Law, Medicine, Dentistry)
- h. Ph.D. or other doctoral degree

26. What graduate degree(s) do you have? (Check all that apply)

- a. Ph.D. (or equivalent)
- b. Medical (or equivalent)
- c. D.V.M. (or equivalent)
- d. M.S., M.A., or M.B.A.
- e. Other type of master's or professional degree(s) (please specify): _____

27. What is the name of your academic department? _____
28. What is your field of study? _____
29. Is your academic department in your institution's medical school?
- Yes
 - No
- 30a. In what month did you receive your undergraduate degree? [*drop down list*]
- 30b. In what year did you receive your undergraduate degree? [*drop down list*]
- 31a. In what month did you start your Ph.D. program? [*drop down list*]
- 31b. In what year did you start your Ph.D. program? [*drop down list*]
- 32a. In what month did you earn your Ph.D.? [*drop down list*]
- 32b. In what year did you earn your Ph.D.? [*drop down list*]
- 33a. In what month did you start your current postdoctoral position? [*drop down list*]
- 33b. In what year did you start your current postdoctoral position? [*drop down list*]
34. Including your current position, how many postdoctoral positions have you held? [*drop down list*]
35. Including your current position, how many years, in total, have you been in a postdoctoral position? [*drop down list*]
36. Which of the following best describes your ethnicity? (*optional*)
- Hispanic or Latino
 - Not Hispanic or Latino
37. Which of the following describes your race? (Please check all that apply) (*optional*)
- American Indian or Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian or other Pacific Islander
 - White
38. What is your citizenship status? (*optional*)
- US citizen since birth
 - Naturalized US citizen
 - Non-US citizen with permanent resident visa (green card)
 - Non-US citizen with temporary US visa
39. What is your gender? (*optional*)
- Male
 - Female
40. In what year were you born? (*optional*) [*drop down list*]

3. Exit Survey for Graduate Students

OMB# 0925-0718 EXP. DATE: 05/31/2018

Public reporting burden for this collection of information is estimated to average 15 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-XXXX). Do not return the completed form to this address.

SECTION 1. INTRODUCTION

This survey is part of a long-term study by the NIH to measure the effect of career development activities on graduate students and postdoctoral scientists. We appreciate your participation in this survey. Your responses will help improve biomedical research training programs both at your institution and nationwide, and your continued participation is vital to the success of this study.

We would like to invite you to continue sharing your experiences and insights by participating in surveys after you exit your institution. Please reconfirm your email address(es) below to receive surveys after graduation.

Primary Email Address (i.e., personal or non-institutional): _____

Secondary Email Address (i.e., personal or non-institutional): _____

SECTION 2. INFORMATION ABOUT DEGREE

1a. What is the month of your thesis/dissertation defense? *[drop down list]*

1b. What is the year of your thesis/dissertation defense? *[drop down list]*

2a. What is the month of your graduation? *[drop down list]*

2b. What is year of your graduation? *[drop down list]*

3. What is the graduate degree that you received/will receive upon graduation from your current institution? *(Check all that apply)*

- a. Ph.D. (or equivalent)
- b. Medical (or equivalent)
- c. D.V.M. (or equivalent)
- d. M.S., M.A., M.B.A.
- e. I left graduate school before attaining a degree.
- f. Other type of master's or professional degree(s) (please specify): _____

4. What is your field of study? _____

SECTION 3. PARTICIPATION IN CAREER DEVELOPMENT ACTIVITIES

5. In the past 12 months, which of the following have you done as a part of your career development?

	Yes	No	I do not remember
a. Held an internship within your institution			
b. Held an internship outside your institution			
c. Job shadowing (not as a part of an internship)			
d. Sought career advice from your PI/thesis advisor			
e. Sought career advice from a faculty member (other than your PI/thesis advisor), a staff member, or professional counselor at your institution			
f. Discussed career plans with professionals outside of academia			
g. Read books, articles, and/or online sources about career development or planning			
h. Discussed career plans with family			
i. Attended a course about career planning for credit			
j. Attended a course about career planning not for credit			
k. Attended a career-related event at your institution (e.g., workshop, panel, career fair, seminar, etc.)			
l. Attended a career-related event NOT at your institution (e.g., workshop, panel, career fair, seminar, etc.)			
m. Other (please specify): _____			

6. Please comment on: (1) The specific knowledge and/or skills that you gained from participating in career development activities (2) How you have used the knowledge and/or skills _____

SECTION 4. UNDERSTANDING OF CAREER PATHS

7. How confident are you that you can do the following?

Items	5 Completely confident	4 Highly confident	3 Moderately confident	2 Minimally confident	1 Not at all confident
a. Assess your abilities to pursue your desired career path(s)					
b. Determine the steps to pursue your desired career path(s)					
c. Seek advice from professionals in your desired career path(s)					
d. Identify potential employers, firms, and institutions relevant to your desired career path(s)					
e. Achieve your career goals					
f. Discuss your career goals with your PI/thesis advisor					

Below is a list of career paths commonly followed by Ph.D.-level scientists. These career paths are from the *my Individual Development Plan (myIDP)*, a career planning tool that helps graduate students identify and pursue long-term goals. Please review the descriptions in the Career Path Table below to help answer questions about these career paths. [Note to programmer: Insert hyperlink into “Individual Development Plan (myIDP)” using: <http://myidp.sciencecareers.org>]

Career Path Table

Career Paths	Description
a. Principal investigator in a research-intensive institution	Independent researcher at a medical school, private research institute, government lab or university with minimal teaching responsibilities.
b. Research in industry	Discovery or preclinical researcher; manager of a research team or facility.
c. Research staff in a research-intensive institution	Staff scientist or researcher in academia or government, lab manager, director of a multi-user research facility in an academic institution.
d. Combined research and teaching careers	Faculty at a liberal arts college or university whose job includes both research and major teaching responsibilities.
e. Teaching-intensive careers in academia	A primarily teaching faculty position in a research university, liberal arts college, community college.
f. Science education for K-12 schools	Classroom teacher; curriculum developer; science specialist.
g. Science education for non-scientists	Education or public outreach specialist such as at a science museum or scientific society.
h. Clinical practice	Clinician such as genetics counselor, therapist, physician.
i. Public health related careers	Public health program analyst or evaluator; epidemiologist; biostatistician; medical informaticist.
j. Scientific/medical testing	Testing specialist in an environmental, public health, genetics, or forensic science setting (intelligence agencies, federal/state departments of justice); clinical diagnostician.
k. Science writing	Science, medical, or technical writer or journalist; science editor; science publisher.
l. Research administration	Research administrator in private or public research institutions, government or academia, including compliance officers, grants and contracts officers; dean or director of research programs.
m. Science policy	Public affairs/government affairs staff at scientific societies, foundations, government entities, or think tanks.
n. Intellectual property	Patent agent; patent attorney; technology transfer specialist.
o. Business of science	Management consultant; business development professional in a biotech company; venture capitalist; market researcher; investment analyst.
p. Entrepreneurship	Starting your own business.
q. Sales and marketing of science-related products	Medical science liaison; technical sales representative; marketing specialist.
r. Support of science-related products	Technical support specialist; field application specialist; product development scientist or engineer.
s. Drug/device approval and production	Regulatory affairs professional; quality control specialist.
t. Clinical research management	Clinical research project/trials manager or coordinator.
Other options -- not included in the my Individual Development Plan (myIDP):	

Career Paths	Description
u. Career that is not related to science	
v. Other	

8. Which statement best describes your familiarity with the 20 career paths from the my Individual Development Plan (myIDP) shown in the Career Path Table?

- I am familiar with all of these career paths
- I am familiar with most of these career paths (between 13 and 19)
- I am familiar with some of these career paths (between 7 and 12)
- I am familiar with a few of these career paths (between 1 and 6)
- I am not familiar with any of these career paths

9. Based on the list of career paths, to what extent are you currently considering the following?

Career Paths	5 Will definitely pursue	4 Strongly considering	3 Moderately considering	2 Slightly considering	1 Not at all considering	Not familiar enough to decide
a. Principal investigator in a research-intensive institution						
b. Research in industry						
c. Research staff in a research-intensive institution						
d. Combined research and teaching careers						
e. Teaching-intensive careers in academia						
f. Science education for K-12 schools						
g. Science education for non-scientists						
h. Clinical practice						
i. Public health related careers						
j. Scientific/medical testing						
k. Science writing						
l. Research administration						
m. Science policy						
n. Intellectual property						
o. Business of science						
p. Entrepreneurship						
q. Sales and marketing of science-related products						

Career Paths	5 Will definitely pursue	4 Strongly considering	3 Moderately considering	2 Slightly considering	1 Not at all considering	Not familiar enough to decide
r. Support of science-related products						
s. Drug/device approval and production						
t. Clinical research management						
u. Career that is not related to science (please specify): _____						
v. Other (please specify): _____						

10. How influential are the following factors in your choice of career path(s)?

Career Path Factors	5 Extremely influential	4 Very influential	3 Moderately influential	2 Slightly influential	1 Not at all influential
a. Professional satisfaction					
b. Geographic location					
c. Work-life balance					
d. Family concerns					
e. Salary level					
f. More job openings					
g. Opportunities for advancement					
h. Availability of funding for research					
i. Current PI/thesis advisor advice					
j. Other (please specify): _____					

SECTION 5. SUPPORT FOR PURSUING DESIRED CAREER PATHS

11. To what extent do you agree with the following statements?

Statements	5 Strongly agree	4 Agree	3 Neutral	2 Disagree	1 Strongly disagree
a. I received the training I needed for my desired career path(s)					
b. I was encouraged by my graduate program/department to pursue my career goals					

12. In the past 12 months, how often have you discussed your career goals with the following?

Individuals	Weekly	Monthly	Quarterly	Semiannually	Annually	Never
a. Your PI/thesis advisor						
b. Faculty (other than your PI/thesis advisor), staff member, or other professional from your institution						
c. A professional outside your institution whom you consider a mentor						
d. Peers						
e. Family members						

13. Considering your interactions with your PI/thesis advisor, to what extent do you agree with the following statements?

PI/Thesis Support	5 Strongly agree	4 Agree	3 Neutral	2 Disagree	1 Strongly disagree	I do not know
a. I was encouraged by my PI/thesis advisor to pursue career development activities toward my career goals						
b. I was encouraged by my PI/thesis advisor to pursue my career goals						

SECTION 6. IMPACT OF CAREER DEVELOPMENT ACTIVITIES

14. Have you participated in any of the career development activities offered by the [insert name of school's specific BEST program name (Example: ASPIRE)] program? [Optional note for programmer: school specific example activities may be inserted here]

- a. Yes
- b. No (Go to Q17)

c. I do not know/I do not remember (*Go to Q17*)

15. Considering the career development activities you have participated in, how helpful was the [*insert name of school's specific BEST program name (Example: ASPIRE)*] program in providing:

Statements	5 Extremely helpful	4 Very helpful	3 Moderately helpful	2 Slightly helpful	1 Not at all helpful
a. Information about a wide range of careers					
b. Working knowledge of the skills necessary for a wide range of careers					
c. Resources (e.g., online videos, courses, etc.) to pursue a wide range of careers					
d. Exposure to a network of professionals from a wide range of careers					
e. Information to assist in making career decisions					

16. What [*insert name of school's specific BEST program name (Example: ASPIRE)*] program activities or events most influenced your career development? Please comment on why these were influential. Examples of career development activities include workshops, seminars, internships, courses, etc. [*Optional note for programmer: these general example activities may be replaced with school specific example activities*]

17. Did you participate in career development activities other than the ones provided by the [*insert name of school's specific BEST program name (Example: ASPIRE)*] program?

- a. Yes
- b. No (*Go to Q19*)
- c. I do not know/I do not remember (*Go to Q19*)

18. Please describe the activities, events, and/or resources that were NOT part of the [*insert name of school's specific BEST program name (Example: ASPIRE)*] program that most influenced your career development. _____

SECTION 7. PUBLICATIONS

19. Have you been an author on an article that was published in a peer-reviewed journal (include publications before and during Ph.D. program)?
- a. Yes
 - b. No (*Go to Q23*)
20. What is your total number of articles published in peer-reviewed journals? _____
21. Since entering your current graduate program/department, how many of your articles have been published in peer-reviewed journals? _____
22. Since entering your current graduate program/department, how many first author publications do you have in peer-reviewed journals? _____

SECTION 8. FINANCIAL SUPPORT

23. Did you receive financial support from your PI/thesis advisor's funding source(s)?
- a. Yes
 - b. No (*Go to Q26, starting with the instructions at the beginning of Section 9. Employment Status*)
 - c. I do not know/I do not remember (*Go to Q26, starting with the instructions at the beginning of Section 9. Employment Status*)
24. What kind of influence do you think this had on your PI/thesis advisor's attitude toward your participation in career development activities?
- a. Very positive
 - b. Somewhat positive
 - c. Neither positive nor negative
 - d. Somewhat negative
 - e. Very negative
 - f. I do not know/I do not remember

25. Please provide any comments: _____

SECTION 9. EMPLOYMENT STATUS

Your responses to the following questions are valuable regardless of your situation. If you have more than one position, please respond based on your primary position (e.g., if you have accepted a position in industry, but also do consulting, please respond based on your industry position).

26. Are you currently planning to pursue another degree?
- Yes, I am planning to enroll in a full-time degree program.
 - Yes, I am planning to enroll in a part-time degree program.
 - No. (*Go to Q29*)
27. What type of degree are you pursuing? (*Check all that apply*)
- Ph.D. (or equivalent)
 - Medical (or equivalent)
 - D.V.M. (or equivalent)
 - M.S. or M.A.
 - M.B.A.
 - J.D.
 - Other type of master's or professional degree(s) (please specify): _____
28. What is the discipline? _____
29. What best describes your current situation? (*Check all that apply*)
- Seeking a postdoc position
 - Seeking a position other than a postdoc
 - Have accepted a position other than a postdoc
 - Have accepted a position as a postdoc at my Ph.D. institution
 - Have accepted a position as a postdoc at an institution other than my Ph.D. institution
 - Other (please specify): _____ (*Go to 42*)
- 30a. In what month did you begin your job search? [*drop down list*]
- 30b. In what year did you begin your job search? [*drop down list*]
31. Approximately how many positions have you applied for since you started your search? _____

(*Note to programmer: If Q29. What best describes your current situation? = a. Seeking a postdoc position OR b. Seeking a position other than a postdoc, AND Q30 DOES NOT = c,d,e, or f, Go to Q42*)

32. What is the title of your position? _____

33. What is the name of the institution or organization where you have accepted a position? _____

34a. In what month did you receive the offer for this position? *[drop down list]*

34b. In what year did you receive the offer for this position? *[drop down list]*

35. Regardless of your specific role/duties, what type of organization is your employer?

- a. Research intensive university or medical school (*Go to Q36*)
- b. College or university which is not research intensive but which conducts some research (*Go to Q36*)
- c. University affiliated research institute (*Go to Q36*)
- d. Community or two-year college (*Go to Q36*)
- e. Pre-college educational system (preschool through high school) (*Go to Q36*)
- f. U.S. Federal government (*Go to Q37*)
- g. U.S. State government (*Go to Q37*)
- h. U.S. Local government (*Go to Q37*)
- i. Foreign government (*Go to Q37*)
- j. Not for profit organization (*Go to Q37*)
- k. Industry/Corporate (for profit) (*Go to Q37*)
- l. Self-employed (*Go to Q37*)
- m. Other (please specify): _____ (*Go to Q37*)

36. Which best describe this position?

- a. Academic Faculty, tenure-track
- b. Academic Faculty, non-tenure-track
- c. Non-faculty
- d. Other (please specify): _____

37. Which best describes the duties of this position? (*Check all that apply*)

- a. Research
- b. Teaching
- c. Administration
- d. Management
- e. Other (please specify): _____

SECTION 9. BACKGROUND AND DEMOGRAPHIC INFORMATION

34. What graduate degree(s) do you have? (*Check all that apply*)
- a. Ph.D. (or equivalent)
 - b. Medical (or equivalent)
 - c. D.V.M. (or equivalent)
 - d. M.S., M.A., or M.B.A.
 - e. Other type of master's or professional degree(s) (please specify): _____
- 35a. In what month did you receive your Ph.D.? [*drop down list*]
- 35b. In what year did you receive your Ph.D.? [*drop down list*]
36. What was your field of study? _____
37. Which of the following best describes your ethnicity? (*optional*)
- a. Hispanic or Latino
 - b. Not Hispanic or Latino
38. Which of the following describes your race? (Please check all that apply) (*optional*)
- a. American Indian or Alaska Native
 - b. Asian
 - c. Black or African American
 - d. Native Hawaiian or other Pacific Islander
 - e. White
39. What is your citizenship status? (*optional*)
- a. US citizen since birth
 - b. Naturalized US citizen
 - c. Non-US citizen with permanent resident visa (green card)
 - d. Non-US citizen with temporary US visa
40. What is your gender? (*optional*)
- a. Male
 - b. Female

41. In what year were you born? *[drop down list]*

5. Data Form

The purpose of the Data Form is to document the BEST program activities at your institution and gather the information listed in the NIH RFAs. Please read these instructions prior to completing the sections. If you have any questions, please contact Windrose Vision by phone at 703-766-4674 or by email at windrose@windrosevision.com.

The form consists of three sections: (1) Program Description and Participation in BEST Activities (reported annually); (2) Aggregate Data from Participating Departments/Graduate Programs (reported annually); and (3) Baseline Information for the Five Years Prior to Receiving the BEST Award (reported once).

SECTION 1. PROGRAM DESCRIPTION AND PARTICIPATION IN BEST PROGRAM ACTIVITIES (REPORTED ANNUALLY)

OMB# 0925-0718 EXP. DATE: 05/31/2018

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Use the Secure Email File Transfer (SEFT) service to submit Section 1 of the Data Form to the NIH.

- A. ACADEMIC YEAR REPORTING PERIOD:
A1. START (MM/DD/YYYY): ___/___/_____
A2. END (MM/DD/YYYY): ___/___/_____
B. INSTITUTION NAME: _____
C. PROGRAM NAME: _____
D. BEST PROGRAM START DATE (MM/DD/YYYY): ___/___/_____
E. NAME OF POINT OF CONTACT: _____
F. EMAIL OF POINT OF CONTACT: _____
G. DATE FORM SUBMITTED (MM/DD/YYYY): ___/___/_____

PROGRAM DESCRIPTION

The information collected in this section addresses the following RFA Items:

- Graduate Students: Participation in activities contributing to the goals of the program (how many students participate, how many hours on average do they participate over what span of time).*
- Postdoctoral Scientists: Degree of participation in activities contributing to the goals of the program (how many postdoctoral scientists participate, how many hours on average do they participate over what span of time).*

j. Scientific/medical testing Testing specialist in an environmental, public health, genetics, or forensic science setting (intelligence agencies, federal/state departments of justice); clinical diagnostician.	
k. Science writing Science, medical, or technical writer or journalist; science editor; science publisher.	
l. Research administration Research administrator in private or public research institutions, government or academia, including compliance officers, grants and contracts officers; dean or director of research programs.	
m. Science policy Public affairs/government affairs staff at scientific societies, foundations, government entities, or think tanks.	
n. Intellectual property Patent agent; patent attorney; technology transfer specialist.	
o. Business of science Management consultant; business development professional in a biotech company; venture capitalist; market researcher; investment analyst.	
p. Entrepreneurship Starting your own business.	
q. Sales and marketing of science-related products Medical science liaison; technical sales representative; marketing specialist.	
r. Support of science-related products Technical support specialist; field application specialist; product development scientist or engineer.	
s. Drug/device approval and production Regulatory affairs professional; quality control specialist.	
t. Clinical research management Clinical research project/trials manager or coordinator.	
u. Other (please specify below)	
u. Please specify:	
INDIVIDUAL DEVELOPMENT PLAN	
4a. Which Individual Development Plan (IDP) does your institution use? (Drop down box: myIDP only, Institutional IDP only, myIDP and Institutional IDP, None) <input type="checkbox"/> myIDP only <input type="checkbox"/> Institutional IDP only <input type="checkbox"/> myIDP and Institutional IDP <input type="checkbox"/> None	

4b. For which group is an IDP required at your institution? (Drop down box: Graduate Students only, Postdoctoral Scientists only, Graduate Students and Postdoctoral Scientists, Neither Graduate Students nor Postdoctoral Scientists)

- Graduate Students only Postdoctoral Scientists only Graduate Students and Postdoctoral Scientists
 Neither Graduate Students nor Postdoctoral Scientists

4c. Which best describes the use of an IDP at your institution? (Drop down box: It is used institution-wide, It varies by department, It varies by graduate program, Not Applicable)

- It is used institution-wide
 It varies by department
 It varies by graduate program
 Not applicable

4d. Additional Comments: _____

4e. Is completion of an IDP mandatory for BEST participants? (Drop down box: It is mandatory, It is optional, Completion of an IDP is not part of BEST program)

- It is mandatory It is optional Completion of an IDP is not part of BEST program

4f. Additional Comments: _____

ADVISORY BOARD AND/OR STEERING COMMITTEE FOR BEST PROGRAM

5a. Please select if your BEST program has the following: (Drop down box: Advisory Board only, Steering Committee only, Advisory Board and Steering Committee, None)

- Advisory Board only Steering Committee only Advisory Board and Steering Committee None

If your program has an Advisory Board, please answer the following:

5b. What is their role: _____

5c. How many members are serving on the board? _____

5d. Are the members external or internal to the institution? (Drop down box: Internal only, External only, Internal and External)

- Internal only External only Internal and External

If your program has a Steering Committee, please answer the following:

5e. What is their role: _____

5f. How many members are serving on the committee? _____

5g. Are the members external or internal to the institution? (Drop down box: Internal only, External only, Internal and External)

- Internal only External only Internal and External

5h. Additional Comments: _____

STATUS UPDATE OF NIH SURVEY ADMINISTRATION

6a. Is your institution administering the NIH surveys for the national cross-site evaluation? (Drop down box: Yes, No)

Yes (*If yes, go to Q6b*)

No (*If no, go to the Activities Characterization table in the next sub-section: Guidance for Reporting Participation in BEST Program Activities*)

6b. Which of the following surveys is your institution administering? (Drop down box: Yes, No)

- Graduate Student Entrance Survey
 Graduate Student Interim Survey
 Graduate Student Exit Survey
 Graduate Student Post-Exit Survey
 Postdoctoral Scientist Entrance Survey
 Postdoctoral Scientist Exit Survey

6c. How many surveys have been administered in the past academic year? (Not Applicable for 2015)

a. Number of Graduate Student Entrance Surveys: _____

b. Number of Graduate Student Interim Surveys: _____

c. Number of Graduate Student Exit Surveys: _____

d. Number of Graduate Student Post-Exit Surveys: _____

e. Number of Postdoctoral Scientist Entrance Surveys: _____

f. Number of Postdoctoral Scientist Exit Surveys: _____

6d. Additional Comments: _____

GUIDANCE FOR REPORTING PARTICIPATION IN BEST PROGRAM ACTIVITIES

Activities Characterization

Categorize your BEST activities into the following three types:

A. New – The activity was initiated by the BEST award. It did not exist prior to the BEST award.

- Ex. The Awardee institution establishes a new professional mentoring program which involves pairing graduate students with alumni. This activity was not implemented prior to the BEST award.

B. Existing activity substantially enhanced or expanded by BEST award – The activity was in place at the Awardee institution prior to the BEST award, but the activity has been substantially enhanced or expanded. An existing activity may be considered substantially enhanced or expanded if the BEST award has allowed for the addition of new components or an increase in the scope of existing components.

- Ex. Prior to the BEST award, the institution offered graduate students in biomedical sciences two career tracks: entrepreneurship and science policy. Because of the BEST award, a government career track was added to the training curricula.
- Ex. Prior to the BEST award, the institution offered two internships each year. Because of the BEST award, the number of internships has doubled.

C. Existing activity – The activity was in place at the institution prior to the BEST award and has become part of the BEST program. The existing activity did not have to be substantially expanded or enhanced to fit in the BEST program. Note: if the activity has been updated in a manner that would have happened even without the BEST award, then that activity should be included under this category (existing).

- Ex. A grant writing workshop that has been offered to graduate students in the past is now being targeted to BEST postdoctoral scientists. The actual content has not been altered for BEST, and the only updates are the regular ones that would have occurred anyway, such as updating the points of contact within the institution, dates, etc.

Reporting Individual and Aggregate Level Data

It is recognized that participation in BEST activities will vary. Some graduate students and postdoctoral scientists may only attend activities open to everyone in the participating departments/graduate programs, such as seminars or symposia, while others may attend activities requiring more participation in discussions or close interactions with peers, instructors, and professionals, such as workshops, courses, and internships.

The NIH is interested in gathering information from all levels of participation, so tables are provided to report participation at the individual and aggregate level. In cases where it may be challenging to accurately track attendance for activities delivered to a large gathering of graduate students and postdoctoral scientists, please report aggregate data for participation. Although graduate students and postdoctoral scientists, whose participation is only reported in the aggregate, are benefitting from the program, NIH is specifically interested in gathering individual level data.

The Awardee will determine the activities that are most suitable for individual tracking. To assist Awardees in making this determination, consider the following characteristics of activities for participants that could be reported at the individual level:

- Activity is mandatory for the BEST program;
- Attendance is tracked for BEST participants;
- Prior registration is needed in order to participate in a specific activity; or
- An application is needed to participate in a specific activity.

Selecting the Appropriate Tables to Report Participation in Your BEST Program

Please review the codes and definitions of BEST activities in Table A and select the activities that are part of your BEST program. Column C lists the table to report the participation of graduates students/postdoctoral scientists in program activities. Use the Evaluation ID for each participant to report individual level data. Use one table per activity, for example, if your BEST program held five workshops during the past academic year, five tables (one for each workshop) will be used to report the participation of graduate students and/or postdoctoral scientists. If the definition of an activity does not encompass all aspects of your BEST activity, please note the additional aspects in the comment section of the reporting table.

The tables and examples are included in the subsequent pages.

-When adding new rows in order to report activities or participants, click on the row number in the left margin of the last row in the table, then right-click and select "insert." You can then enter the information that is specific to your institution by overwriting the example entry and filling in the blank rows.

-If you have multiple instances of an individual-level activity, you will need to repeat the table appropriately to report on each instance of the activity. To do this, navigate to the appropriate tab of the table to be duplicated and right-click on the tab. Select "Move or Copy," then check the "Create a copy" box and select where to place the copied tab in the workbook (you should place the copied tab after the original tab and before the next activity table).

Table A. Activity Code, Definition, Table for Reporting, and Data Type

A Activity Code	B Definition	C Reporting Table	D Data Type
Certificate Program	Graduate students/postdoctoral scientists receive a certificate. The certificate may be in recognition of their participation in the BEST program, or it may be a non-BEST specific accredited professional certificate.	Table 7a	Individual
Clubs	An association or organization dedicated to a particular interest in which graduate students/postdoctoral scientists participate.	Table 7b	Aggregate
Co-Funding Source	Graduate students/postdoctoral scientists receive funds to travel to a career and/or professional development event, meeting, or conference. Only include if a portion of the funding comes from the BEST award.	Table 7c	Individual

A Activity Code	B Definition	C Reporting Table	D Data Type
Course (for credit or not for credit)	A course focusing on a topic or skill.	Table 7d	Individual
Externship	Job shadowing a professional at work for the purpose of observing the work environment and learning about the expectations of a profession.	Table 7e	Individual
Internship	Working in a professional setting for the purpose of receiving hands-on training.	Table 7f	Individual
Mixer/Networking Event	Gathering of graduate students/postdoctoral scientists and professionals with the purpose of networking. This event may take place in person or in an online setting.	Table 7g	Aggregate
Peer Mentoring	Activities involving graduate students/postdoctoral scientists mentoring each other, including group discussions or team meetings not part of a course, seminar, or workshop.	Table 7h	Individual
Professional Mentoring	Activities involving professionals mentoring graduate students or postdoctoral scientists. Professionals could include faculty members (other than PI/thesis advisor), institutional staff members, alumni, career coaches, or professionals in any industry. Mentoring can take place in a group setting or one-on-one.	Table 7i	Individual
Resource	A website, database or other resource created for the BEST program.	Table 7j	N/A
Self-assessment	Participants completes a career or personality self-assessment tool, such as the Myers-Briggs Personality Indicator (MBTI) or a Career Assessment Worksheet. A self-assessment may be an independent activity, or it could be a component of another activity, such as a workshop or course. Additionally, it may require a follow-up with faculty or staff members to discuss the results.	Table 7k	Aggregate
Seminar	One or more speakers give a presentation or lecture for the purpose of education or training. A seminar may take place in person or in an online setting. This activity may occur over one or more days.	Table 7l (one day, attendance tracked) Table 7m (multiple days, attendance tracked) Table 7n (attendance not tracked)	Individual (Table 7l, 7m) Aggregate (Table 7n)

A Activity Code	B Definition	C Reporting Table	D Data Type
Symposium	An event with multiple sessions and speakers. This activity may occur over one or more days.	Table 7l (one day, attendance tracked) Table 7m (multiple days, attendance tracked) Table 7n (attendance not tracked)	Individual (Table 7l, 7m) Aggregate (Table 7n)
Visit to Employer Site	Graduate students/postdoctoral scientists visit a work setting to learn more about an organization and tour the facility.	Table 7o	Individual level
Workshop	An event for the purpose of gaining knowledge or skills which involves hands-on activities and active participation by attendees. A workshop may take place in person or in an online setting. This activity may occur over one or more days.	Table 7l (one day, attendance tracked) Table 7m (multiple days, attendance tracked) Table 7n (attendance not tracked)	Individual (Table 7l, 7m) Aggregate (Table 7n)
Other (please specify):_____	Please describe the activity	Table 7p	Individual

TABLES TO REPORT PARTICIPATION IN BEST ACTIVITIES

Table 7a. Certificate Program (individual level)		
Awardee Activity Name: <u>Ex. BEST Careers Certificate</u>		
Accredited Program (Drop down box: Yes, No): <i>Yes</i>		
Evaluation ID	Graduate Student or Postdoctoral Scientist	Received Certificate (Yes/No)
<i>Ex. 0000001</i>	<i>Graduate student</i>	<i>Yes</i>
<i>Ex. 0000002</i>	<i>Postdoc</i>	<i>No</i>
<i>Ex. 0000003</i>	<i>Graduate student</i>	<i>Yes</i>

Table 7b. Clubs (aggregate level)									
Club Name	Focus	Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity)	If existing activity was substantially enhanced or expanded, explain how	Meeting Frequency	Approximate Number of Members	Membership Type (Drop down box: A. Graduate Students, B. Postdoctoral Scientists, C. Graduate Students and Postdoctoral Scientists)	Leadership Type [Drop down box: A. Faculty/PI, B. Staff, C. Graduate Student, D. Postdoctoral Scientist, E. Graduate Students and Postdoctoral Scientists, F. External Partner, G. Other (please specify)]	Mandatory Activity for BEST Program (Y/N)	Additional Comments
<i>Ex. Teachers with Biomedical Backgrounds</i>	<i>Discuss challenges and strategies for</i>	<i>B</i>	<i>A steering committee was established and ad hoc meetings</i>	<i>Monthly</i>	<i>40</i>	<i>C</i>	<i>E</i>	<i>N</i>	

Club Name	Focus	Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity)	If existing activity was substantially enhanced or expanded, explain how	Meeting Frequency	Approximate Number of Members	Membership Type (Drop down box: A. Graduate Students, B. Postdoctoral Scientists, C. Graduate Students and Postdoctoral Scientists)	Leadership Type [Drop down box: A. Faculty/PI, B. Staff, C. Graduate Student, D. Postdoctoral Scientist, E. Graduate Students and Postdoctoral Scientists, F. External Partner, G. Other (please specify)]	Mandatory Activity for BEST Program (Y/N)	Additional Comments
	<i>becoming teachers</i>		<i>were formalized to meet regularly. Guest speakers in the field are invited to the meetings each month.</i>						

Awardee Activity Name: <u>Ex. BioTech Career Scholarship</u> Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity): <input checked="" type="checkbox"/> A. New

B. Existing activity substantially enhanced or expanded by BEST award
 C. Existing activity
 If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Y____ N X
 Please describe the criteria for receiving the co-funding: Ex. Graduate Students must have completed their first year and submit an essay. A committee consisting of the BEST program coordinator and two faculty members makes the determination.
 Additional Comments:

Evaluation ID	Graduate Student or Postdoctoral Scientist	Activity Funded by Co-funding Source	Total Funds in US Dollars	BEST Award Funds in US Dollars	Non-BEST Award Funds in US Dollars
<i>Ex. 0000001</i>	<i>Graduate student</i>	<i>Travel to conference</i>	<i>\$2,000</i>	<i>\$1,200</i>	<i>\$800</i>
<i>Ex. 0000002</i>	<i>Postdoc</i>	<i>Registration fee for conference</i>	<i>\$200</i>	<i>\$200</i>	<i>\$0</i>

Table 7d. Courses for Credit and Not for Credit (individual level)

Awardee Activity Name: Ex. Science Policy Careers course
 Topic: Ex. Provides the knowledge and skills needed for pursuing careers in science policy
 Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):
 X A. New
 B. Existing activity substantially enhanced or expanded by BEST award
 C. Existing activity
 If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Yes X No ____
 Campus or University: Ex. GIT
 Is this course for credit or not for credit? (Drop down box: Credit, Not for Credit) Credit X Not for Credit: ____
 If course is for credit, how many credit hours? Ex. 2 credit hours

Number of Hours per Session: Ex. 1 hour

Total Number of Hours: Ex. 30 hours

Span of Time in Weeks: Ex. 10 weeks

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y ___ N X

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y X N ___

If yes, please describe the requirements for participation. Ex. Graduate students must have passed their preliminary exams and postdoctoral scientists must be in their 2nd year

Additional Comments:

Evaluation ID	Graduate Student or Postdoctoral Scientist	Mandatory Activity for this Participant (Y/N)
<i>Ex. 0000001</i>	<i>Graduate student</i>	<i>Y</i>
<i>Ex. 0000002</i>	<i>Postdoc</i>	<i>N</i>
<i>Ex. 0000003</i>	<i>Graduate student</i>	<i>Y</i>

Table 7e. Externships (individual level)

Awardee Activity Name: Ex. My Career Externship

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):

___ A. New

X B. Existing activity substantially enhanced or expanded by BEST award

___ C. Existing activity

If existing activity was substantially enhanced or expanded, explain how: Ex. Because of the BEST Award, we have increased our number of industry partners from 5 to 10, and the number of externships from 10 to 20.

Mandatory activity for BEST program? (Drop down box: Yes, No) Y ___ N X

Are PIs reimbursed for the time graduate students are out of the lab? (Drop down box: Yes, No) Y ___ N X

Are PIs reimbursed for the time postdoctoral scientists are out of the lab? (Drop down box: Yes, No) Y X N ___

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y ___ N X

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y ___ N X

If yes, please describe the requirements for participation.

Is there an application for this activity? (Drop down box: Yes, No) Y X N ___

Additional Comments:

—

Examples:

Example 1: In this example, the externship occurred for 2 hours per session twice a week (i.e. Mondays and Wednesdays) over a 3 month period. Span of time in weeks would be 12 (3 months at 4 weeks per month) and the total number of sessions would be 24 (twice per week for 12 weeks).

Example 2: In this example, the student participates in an externship for 2 hours each Friday for one month. In this case, the total number of sessions would be 4 and the span of time in weeks would be 4.

Example 3: In this example, the student participates in an externship for 4 hours in one day. In this case, the total number of sessions would be 1 and the span of time in weeks would be 1.

Example 4: In this example, the student participates in an externship for 2 hours each session once a month for four sessions. In this case, the span of time in weeks would be 16 weeks.

Evaluation ID	Graduate Student or Postdoctoral Scientist	Company Name	Duties	Approximate Number of Hours Per Session	Total Number of Sessions	Span of Time in Weeks	For Credit (Y/N)	Mandatory Activity for this Participant (Y/N)
0000001	Postdoc	Writing Company	Proofreading science publications	2 hours	24	12 weeks	Y	N
0000002	Graduate student	BioTech	Job shadowing	2 hours	4	4 weeks	N	Y
0000003	Graduate student	Teaching Organization	Observe classes	4 hours	1	1 week	N	Y
0000004	Graduate student	ChemicalX, Inc.	Shadow technician in the lab	2 hours	4	16 weeks	N	Y

Table 7f. Internships (individual level)

Awardee Activity Name: Ex. Internship

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):

A. New

B. Existing activity substantially enhanced or expanded by BEST award

C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Y _____ N

Are PIs reimbursed for the time graduate students are out of the lab? (Drop down box: Yes, No) Y _____ N

Are PIs reimbursed for the time postdoctoral scientists are out of the lab? (Drop down box: Yes, No) Y N _____

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y _____ N

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y N _____

If yes, please describe the requirements for participation. Ex. No requirements for postdocs, graduate students must have completed first year.

Is there an application for this activity? (Drop down box: Yes, No) Y N _____

Additional Comments:

Examples:

Example 1: In this example, the unpaid internship occurred on a part-time basis for 10 hours per week over a 6 month period. Span of time in weeks would be 24 (6 months at 4 weeks per month).

Example 2: In this example, the graduate student participates in a full-time internship for 1 month. The salary is 100% covered by the graduate school. In this case, the approximate number of hours per week would be 40 and the span of time in weeks would be 4.

Example 3: In this example, the graduate student participates in a part-time internship for 16 hours per week for 2 months with 70% of the salary being covered by the internship provider and the rest (30%) covered by department funds. In this case, the total number of weeks would be 8 (2 months at 4 weeks per month).

Example 4: In this example, the graduate student participates in an internship for 20 hours per week for 3 months. The salary is 100% covered by the internship provider. In this case, the span of time in weeks would be 16 weeks.

Evaluation ID	Graduate Student or Postdoctoral Scientist	List Percentage Salary Covered by Internship Partner	List Percentage Salary Covered by Other Sources (e.g., graduate school, department funds, etc.) and Source Name	Internship Partner Name	Full Time/ Part Time	Duties	Approximate Number of Hours Per Week	Span of Time in Weeks	For Credit (Y/N)	Mandatory Activity for this Participant (Y/N)
0000001	Postdoc	0%	0%	Writing Company, Inc.	Part Time	Proofreading science publications	10 hours	24 weeks	Y	N
0000002	Graduate student	0%	100%, graduate school	Law School	Full Time	Research patent laws	40 hours	4 weeks	N	Y
0000003	Graduate student	70%	30%, department funds	Merck	Part Time	Lab work	16 hours	8 weeks	N	Y
0000004	Graduate student	100%	0%	Veterinary Hospital	Part Time	Anesthesiology assistant	20 hours	12 weeks	Y	N

Table 7g. Mixer/Networking (aggregate level)

Event Name	Event Description	Delivery (Drop down box: A. Online, B. In Person)	Who are graduate students/postdoctoral scientists networking with	Approximate Number of Professionals for Networking	Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity)	If existing activity was substantially enhanced or expanded, explain how	Approximate Number of Graduate Students	Approximate Number of Postdoctoral Scientists	Mandatory Activity for BEST Program (Y/N)	Comments
Ex. Networking dinner	Speed dating interviews	B	Alumni	27	A	N/A	50	15	N	

Table 7h. Peer Mentoring (individual level)

Awardee Activity Name: Ex. Mentoring Circles

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):

A. New

B. Existing activity substantially enhanced or expanded by BEST award

C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Y N

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y N

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y N

If yes, please describe the requirements for participation.

Additional Comments:

Examples:

Example 1: In this example, the graduate student (Evaluation ID 0000001) participates in a group peer mentoring session that meets for 3 hours once per week for 10 weeks.

Evaluation ID	Graduate Student or Postdoctoral Scientist	Mentoring Focus	Type of Mentorship (Drop down box: A. Group, B. One-on-one)	Approximate Number of Hours per Session	Total Number of Sessions	Approximate Total Hours (Approximate Number of Hours per Session x Total Number of Sessions)	Span of Time in Weeks	Mandatory Activity for this Participant (Y/N)
0000001	Graduate student	How-To: Discussions with PI	A. Group	3 hours	10 sessions	30 hours	10 weeks	Y

Evaluation ID	Graduate Student or Postdoctoral Scientist	Mentoring Focus	Type of Mentorship (Drop down box: A. Group, B. One-on-one)	Approximate Number of Hours per Session	Total Number of Sessions	Approximate Total Hours (Approximate Number of Hours per Session x Total Number of Sessions)	Span of Time in Weeks	Mandatory Activity for this Participant (Y/N)
0000002	Postdoc	Career Planning	A. Group	3 hours	1 session	3 hours	1 week	N
0000003	Graduate student	Obtaining Postdoc Position	B. One-on-One	1 hours	4 sessions	4 hours	4 weeks	Y

Table 7i. Professional Mentoring (individual level)

Awardee Activity Name: Ex. Alumni Career Advice

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):

A. New

B. Existing activity substantially enhanced or expanded by BEST award

C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Y N

Type of mentor (e.g., faculty, career coach, alumni, professional in industry, etc.): Ex. Alumni

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y N

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y N

If yes, please describe the requirements for participation.

Additional Comments:

Examples:

Example 1: In this example, the graduate student (Evaluation ID 0000001) meets in a group professional mentoring session for 3 hours at a time, once per week for ten weeks.

Evaluation ID	Graduate Student or Postdoctoral Scientist	Mentoring Focus	Type of Mentorship (Drop down box: A. Group, B. One-on-one)	Approximate Number of Hours per Session	Total Number of Sessions	Approximate Total Hours (Approximate Number of Hours per Session x Total Number of Sessions)	Span of Time in Weeks	Mandatory Activity for this Participant (Y/N)
0000001	Graduate student	Getting a job in consulting	A. Group	3 hours	10 sessions	30 hours	10 weeks	Y
0000002	Postdoc	Science policy	A. Group	3 hours	1 session	3 hours	1 week	N
0000003	Graduate student	Starting a business	B. One-on-One	1 hours	4 sessions	4 hours	4 weeks	Y

Table 7j. Career Development Resources*Note: For Cohort 1, please include resources developed since the beginning of the Award for the first time this is submitted.*

Resource Name	Resource Description	Collaborator Name(s)	Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity)	If existing activity was substantially enhanced or expanded, explain how	Resource Usage Metrics (e.g., Unique Page Visits, Video Views, Number of Downloads, etc.) ¹	Status at the Time of Reporting [Drop down box: A. Continuing (resource ongoing), B. Discontinued (resource no longer active)]	Resource Location (e.g., URL, YouTube, etc.)	Resource Access [Drop down box: A. For Institution Internal Use Only, B. For Institution Internal Use and External Use, C. Other (please specify)]	Additional Comments
<i>Ex. Career Expo Videos</i>	<i>These videos feature professionals in various career fields describing their daily tasks and can be accessed through our institution's BEST website.</i>	<i>Graduate school</i>	<i>B</i>	<i>The videos were updated to include more professionals from different career fields</i>	<i>15,000 views</i>	<i>A</i>	<i>www.WSUBEST.edu</i>	<i>A</i>	
<i>Ex. Internship Website</i>	<i>This website provides information about internship opportunities at the institution and tips for balancing other work and an internship.</i>	<i>University Career Center</i>	<i>C</i>	<i>N/A</i>	<i>3,000 unique page visits</i>	<i>A</i>	<i>www.MSUbiomedinternships.edu</i>	<i>A</i>	

¹ Identify the metrics to measure the usage of your resource. You are not limited to the examples provided above.

Table 7k. Self-Assessments (aggregate level)

Note: For the Setting column, please indicate if the self-assessment stands alone or is a component of an existing activity.

Assessment Name	Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity)	If existing activity was substantially enhanced or expanded, explain how	Requirements to Participate	Focus	Approximate Number of Graduate Students and Postdoctoral Scientists	Setting: A. Independent activity B. Part of another activity (please specify)	Discussion of Results with Faculty or Staff Required (Y/N)	Mandatory Activity for BEST Program (Y/N)	Additional Comments
<i>Ex. Myers-Briggs Personality Indicator</i>	<i>C</i>	<i>N/A</i>	<i>Graduate students must have passed their preliminary exams and postdocs must be in their second year</i>	<i>Personality</i>	<i>100</i>	<i>B. part of a workshop</i>	<i>Y</i>	<i>Y</i>	

Table 7l. Activities such as Seminars, Workshops, or Symposia that Occur within One Day (individual level)

Awardee Activity Name: Ex. Writing Abstracts Workshop

Activity Code (Drop down box: A. Seminar, B. Workshop, C. Symposium, D. Other please specify):
 A. Seminar
 B. Workshop
 C. Symposium
 D. Other (Please specify)

If D. Other, please specify: _____

Topic: Ex. Writing Skills

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):
 A. New

B. Existing activity substantially enhanced or expanded by BEST award

C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Delivery (Drop down box: A. Online, B. In Person): Online _____ In Person X

Campus or University: Ex. Emory

Mandatory activity for BEST program? (Drop down box: Yes, No) Y _____ N X

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y _____ N X

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y _____ N X

If yes, please describe the requirements for participation. ___

Additional Comments:

Evaluation ID	Graduate Student or Postdoctoral Scientist	Approximate Number of Hours	Mandatory Activity for this Participant (Y/N)
<i>Ex. 0000001</i>	<i>Graduate student</i>	<i>2</i>	<i>Y</i>
<i>Ex. 0000002</i>	<i>Postdoc</i>	<i>3</i>	<i>N</i>
<i>Ex. 0000003</i>	<i>Graduate student</i>	<i>4</i>	<i>Y</i>

Table 7m. Activities such as Seminars, Workshops, or Symposia that Occur over Multiple Days (individual level)

Awardee Activity Name: Ex. Careers Outside Academia

Activity Code (Drop down box: A. Seminar, B. Workshop, C. Symposium, D. Other please specify):

- A. Seminar
- B. Workshop
- C. Symposium
- D. Other (Please specify)

If D. Other, please specify: _____

Topic: Ex. Overview of Career Paths

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):

- A. New
- B. Existing activity substantially enhanced or expanded by BEST award
- C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Delivery (Drop down box: A. Online, B. In Person): Online _____ In Person

Campus or University: Ex. Emory

Number of Days: Ex. 4 days

Number of Hours per Day: Ex. 4 hours

Total Number of Hours: Ex. 4 hours x 4 days = 16 hours

Span of Time in Weeks: Ex. 4 days over 4 weeks

Mandatory activity for BEST program? (Drop down box: Yes, No) Y N _____

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y _____ N

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y _____ N

If yes, please describe the requirements for participation.

Additional Comments:

Evaluation ID	Graduate Student or Postdoctoral Scientist	Mandatory Activity for this Participant (Y/N)	Assume All Sessions Attended (<i>complete only if daily attendance was not taken</i>)	Attended Day 1 Yes/No	Attended Day 2 Yes/No	Attended Day 3 Yes/No	Attended Day 4 * Yes/No
<i>Ex. 0000001</i>	<i>Postdoc</i>	<i>Y</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Ex. 0000002</i>	<i>Graduate student</i>	<i>N</i>		<i>X</i>		<i>X</i>	<i>X</i>
<i>Ex. 0000003</i>	<i>Graduate student</i>	<i>N</i>		<i>X</i>			

* Attended Day: Attended Day 5- Attended Day 30

Awardee Activity Name	Activity Code	Attendees (Drop down box: A. Graduate Students only, B. Postdoctoral Scientists only, C. Graduate Students and Postdoctoral Scientists)	Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity)	If existing activity was substantially enhanced or expanded, explain how	Delivery (Drop down box: A. Online, B. In Person)	Topic	Approximate Number of Hours	Approximate Number of Attendees	Additional Comments
<i>Ex. BEST Career Symposium</i>	<i>Symposium</i>	<i>C</i>	<i>A</i>	<i>N/A</i>	<i>B</i>	<i>Careers in Biotechnology</i>	<i>8 hours</i>	<i>500 attendees</i>	
<i>Ex. Science Writing Boot Camp</i>	<i>Workshop</i>	<i>A</i>	<i>C</i>	<i>N/A</i>	<i>B</i>	<i>Writing Skills</i>	<i>2 hours</i>	<i>600 attendees</i>	

Table 7o. Visit to Employer Site (individual level)

Awardee Activity Name: Ex. Career Trek

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):
 A. New
 B. Existing activity substantially enhanced or expanded by BEST award
 C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Y X N _____

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y _____ N X

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y _____ N X

If yes, please describe the requirements for participation. Graduate students must be in their fourth year

Additional Comments: _____

Evaluation ID	Name of Company	Approximate Number of Hours
Ex. 0000001	Whalen Biomedical Laboratories	2

Table 7p. Other (please specify):

Awardee Activity Name: _____

Activity Description: _____

Activity Characterization (Drop down box: A. New, B. Existing activity substantially enhanced or expanded by BEST award, C. Existing activity):
 A. New
 B. Existing activity substantially enhanced or expanded by BEST award
 C. Existing activity

If existing activity was substantially enhanced or expanded, explain how:

Mandatory activity for BEST program? (Drop down box: Yes, No) Y_____ N_____

Does participation in this activity require PI permission? (Drop down box: Yes, No) Y_____ N_____

Are there requirements for participation in this activity? (Drop down box: Yes, No) Y_____ N_____

If yes, please describe the requirements for participation. _____

Additional Comments: _____

Evaluation ID	Graduate Student or Postdoctoral Scientist	Approximate Number of Hours	Mandatory Activity for this Participant (Y/N)
<i>Ex. 0000001</i>	<i>Graduate student</i>	<i>2</i>	<i>Y</i>
<i>Ex. 0000002</i>	<i>Postdoc</i>	<i>3</i>	<i>N</i>
<i>Ex. 0000003</i>	<i>Graduate student</i>	<i>4</i>	<i>N</i>

Data Form

The purpose of the Data Form is to document the BEST program activities at your institution and gather the information listed in the NIH RFAs. Please read these instructions prior to completing the sections. If you have any questions, please contact Windrose Vision by phone at 703-766-4674 or by email at windrose@windrosevision.com.

The form consists of three sections: (1) Program Description and Participation in BEST Activities (reported annually); (2) Aggregate Data from Participating Departments/Graduate Programs (reported annually); and (3) Baseline Information for the Five Years Prior to Receiving the BEST Award (reported once).

SECTION 2. AGGREGATE DATA FROM PARTICIPATING DEPARTMENTS/GRADUATE PROGRAMS (REPORTED ANNUALLY)

OMB# 0925-0718 EXP. DATE: 05/31/2018

Public reporting burden for this collection of information is estimated to average 90 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 (0925-0718). Do not return the completed form to this address.

Use the Secure Email File Transfer (SEFT) service to submit Section 2 of the Data Form to the NIH.

Provide aggregate data for the departments and/or graduate programs from which your institution is recruiting BEST participants. These departments are referred to in the tables as “Departments/Graduate Programs Participating in BEST.” If data are not available, please indicate that in the comment section for each table.

For awardees with BEST programs spanning multiple institutions, please report the departments/graduate programs for each institution when completing the tables. For example, if a BEST program has participants from University #1 and University #2, each participating department/graduate program from both universities would need to be reported.

- A. ACADEMIC YEAR REPORTING PERIOD:
 - A1. START (MM/DD/YYYY): ___ / ___ / _____
 - A2. END (MM/DD/YYYY): ___ / ___ / _____
- B. INSTITUTION NAME: _____
- C. PROGRAM NAME: _____
- D. NAME OF POINT OF CONTACT: _____
- E. EMAIL OF POINT OF CONTACT: _____
- F. DATE FORM SUBMITTED (MM/DD/YYYY): ___ / ___ / _____

TRAINEE DIVERSITY REPORT OMB 0925-0002 (REV. 08/12)

The information in this section meets the RFA requirement to submit the NIH Training Diversity Report. In the form the term trainee refers to graduate students and postdoctoral scientists participating in the BEST program.

Report on the following:

- *Individuals from racial and ethnic groups that have been shown by the National Science Foundation to be underrepresented in health-related sciences on a national basis.*
- *Individuals with disabilities, who are defined as those with a physical or mental impairment that substantially limits one or more major life activities.*
- *Individuals from disadvantaged backgrounds who are defined as:*
 - *Individuals who come from a family with an annual income below established low-income thresholds, which are found at HHS – Poverty Guidelines, Research, and Measurement [<http://aspe.hhs.gov/poverty/index.cfm>]. Such participants have (1) qualified for Federal disadvantaged assistance, (2) received Health Professions Student Loans (HPSL) or Loans for Disadvantaged Student Program, or (3) received scholarships from the U.S. Department of Health and Human Services under the Scholarship for Individuals with Exceptional Financial Need.*
 - *Individuals who come from a social, cultural, or educational environment, such as that found in certain rural or inner-city environments that have demonstrably and recently directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a research-intensive or research-related career.*

1) NIH Trainee Diversity Report

This report format should NOT be used for data collection from trainees.

Training Grant Title: _____

Total Number of Appointed: _____

Grant Number: _____

PART A. TOTAL TRAINEE APPOINTMENTS REPORT: Number of Trainees Appointed by Ethnicity and Race

Ethnic Category	Females	Males	Sex/Gender Unknown or Not Reported	Total
Hispanic or Latino	<i>Ex. 9</i>	<i>Ex. 11</i>	<i>Ex. 0</i>	<i>Ex. 20</i> *
Not Hispanic or Latino	<i>Ex. 140</i>	<i>Ex. 150</i>	<i>Ex. 0</i>	<i>Ex. 290</i>
Unknown (individuals not reporting ethnicity)	<i>Ex. 2</i>	<i>Ex. 4</i>	<i>Ex. 4</i>	<i>Ex. 10</i>
Ethnic Category: Total of All Trainees*	<i>Ex. 151</i>	<i>Ex. 165</i>	<i>Ex. 4</i>	<i>Ex. 320</i> *
Racial Categories				

Ethnic Category	Females	Males	Sex/Gender Unknown or Not Reported	Total
American Indian/Alaska Native	<i>Ex. 15</i>	<i>Ex. 15</i>	<i>Ex. 0</i>	<i>Ex. 30</i>
Asian	<i>Ex. 34</i>	<i>Ex. 20</i>	<i>Ex. 2</i>	<i>Ex. 56</i>
Native Hawaiian or Other Pacific Islander	<i>Ex. 16</i>	<i>Ex. 13</i>	<i>Ex. 0</i>	<i>Ex. 29</i>
Black or African American	<i>Ex. 24</i>	<i>Ex. 20</i>	<i>Ex. 1</i>	<i>Ex. 45</i>
White	<i>Ex. 80</i>	<i>Ex. 68</i>	<i>Ex. 2</i>	<i>Ex. 150</i>
More Than One Race	<i>Ex. 3</i>	<i>Ex. 2</i>	<i>Ex. 0</i>	<i>Ex. 5</i>
Unknown or Not Reported	<i>Ex. 1</i>	<i>Ex. 1</i>	<i>Ex. 3</i>	<i>Ex. 5</i>
Racial Categories: Total of All Trainees*	<i>Ex. 173</i>	<i>Ex. 139</i>	<i>Ex. 8</i>	<i>Ex. 32*</i> *

PART B. HISPANIC TRAINEE APPOINTMENTS REPORT: Number of Hispanics or Latinos Appointed

Racial Categories	Females	Males	Sex/Gender Unknown or Not Reported	Total
American Indian or Alaska Native	<i>Ex. 1</i>	<i>Ex. 2</i>	<i>Ex. 0</i>	<i>Ex. 3</i>
Asian	<i>Ex. 1</i>	<i>Ex. 1</i>	<i>Ex. 0</i>	<i>Ex. 2</i>
Native Hawaiian or Other Pacific Islander	<i>Ex. 0</i>	<i>Ex. 1</i>	<i>Ex. 0</i>	<i>Ex. 1</i>
Black or African American	<i>Ex. 2</i>	<i>Ex. 2</i>	<i>Ex. 0</i>	<i>Ex. 4</i>
White	<i>Ex. 4</i>	<i>Ex. 4</i>	<i>Ex. 0</i>	<i>Ex. 8</i>
More Than One Race	<i>Ex. 1</i>	<i>Ex. 1</i>	<i>Ex. 0</i>	<i>Ex. 2</i>
Unknown or Not Reported	<i>Ex. 0</i>	<i>Ex. 0</i>	<i>Ex. 0</i>	<i>Ex. 0</i>
Racial Categories: Total of Hispanics or Latinos**	<i>Ex. 9</i>	<i>Ex. 11</i>	<i>Ex. 0</i>	<i>Ex. 20</i> *

PART C. TRAINEES WITH DISABILITIES OR FROM DISADVANTAGED BACKGROUNDS	
Number of Trainees with Disabilities:	<i>Ex. 20</i>
Number of Trainees from Disadvantaged Backgrounds:	<i>Ex. 80</i>

(*) (**) These totals must agree.

PARTICIPATION IN THE BEST PROGRAM BY GRADUATE DEPARTMENTS/PROGRAMS

Table 8. Participating Departments/Graduate Programs, Number of Graduate Students and Postdoctoral Scientists, and BEST Participants in Departments/Graduate Programs.

Data Source(s):				
Additional Comments:				
A Departments/Graduate Programs Participating in BEST	Total Number of all Graduate Students and Postdoctoral Scientists in Participating Departments/Graduate Programs		Number of Graduate Students and Postdoctoral Scientists Participating in BEST	
	B Total Number of Graduate Students	C Total Number of Postdoctoral Scientists	D Number of Graduate Students	E Number of Postdoctoral Scientists
<i>Ex. Chemistry Department</i>	<i>Ex. 100</i>	<i>Ex. 50</i>	<i>Ex. 75</i>	<i>Ex. 25</i>
Total:				

DOCTORATE DEGREES AWARDED

The information in this section addresses the following RFA Item: Graduate Degree(s) Obtained.

Table 9. Elapsed Time to Doctorate (ETD)* for Graduate Students in Participating Departments/Graduate Programs

*Represents the total elapsed time starting from entry into the graduate program to doctoral degree completion, with leaves of absence or other enrollment lapses counting toward the ETD.

Data Source(s):						
Additional Comments:						
A	B	C	D	E	F	G

Departments/Graduate Programs Participating in BEST	Total Number of Students in Programs in Column A who Received a Ph.D. in the Past Academic Year	Elapsed Median Time to Doctorate (in Years) for Students in Column B	Number of Students in Programs in Column A who <u>Participated in BEST</u> and Received a Ph.D. in the Past Academic Year	Elapsed Median Time to Doctorate (in Years) for Students in Column D	Number of Students in Programs in Column A who <u>Did Not Participate in BEST</u> and Received a Ph.D. in the Past Academic Year	Elapsed Median Time to Doctorate (in Years) for Students in Column F
<i>Ex. Biology</i>	<i>Ex. 100</i>	<i>Ex. 6.25 years</i>	<i>Ex. 25</i>	<i>Ex. 5.5 years</i>	<i>Ex. 75</i>	<i>Ex. 6.5 years</i>
Total:						

SUBSEQUENT POSTDOCTORAL TRAINING FOR PH.D. RECIPIENTS

The information in this section addresses the following RFA Item: Subsequent immediate job placement or post-doctoral activity.

(Note: This information addresses Desired Impact #2, Reduce time to desired, non-training, non-terminal career opportunities and reduce time in postdoctoral positions.)

Table 10. Postdoctoral Training for Ph.D. Recipients from the Awardee Institution

Data Source(s):	Ph.D. Recipients from Participating Departments/Graduate Programs		
Additional Comments:	A Total	B Number of BEST Participants	C Number of Non-Participants in BEST
Obtained a postdoctoral position at the Awardee institution	<i>Ex. 60</i>	<i>Ex. 18</i>	<i>Ex. 42</i>
Obtained a postdoctoral position at another institution	<i>Ex. 30</i>	<i>Ex. 2</i>	<i>Ex. 28</i>
Did not go into a postdoctoral position	<i>Ex. 10</i>	<i>Ex. 5</i>	<i>Ex. 5</i>
Total:	<i>Ex. 100</i>	<i>Ex. 25</i>	<i>Ex. 75</i>

Table 11. Length of Time in Postdoctoral Training

Data Source(s):				
Additional Comments:				
A Departments Participating in BEST	B Total Number of Scientists from Column A Currently in Postdoctoral Training Positions <u>at the Awardee Institution</u>	C Average Length of Time in Postdoctoral Training for Scientists in Column B	D Number of Scientists from Column B who are Participating in BEST	E Average Length of Time in Postdoctoral Training for Scientists in Column D
<i>Ex. Life Science</i>	<i>Ex. 50</i>	<i>Ex. 2.5 years</i>	<i>Ex. 35</i>	<i>Ex. 2 years</i>

GRADUATE STUDENTS EXITING BEFORE OBTAINING PH.D. DEGREE

The information in this section addresses the following RFA Item: Information on graduate students who pursued other degree programs as a result of this program’s guidance, including when - during the training period - this change of track took place.

Table 12. Students in Participating Departments/Graduate Programs not completing a Ph.D., and their Subsequent Career Path

Data source(s) [e.g., institution exit survey, alumni survey, interview]:	
Additional comments:	

A Departments/Graduate Program Participating in BEST	B Number of Students in Participating Departments/Graduate Program from Column A who Left their Department/Graduate Program Before Completing their Ph.D.	C What Students in Column B have Done since Exit
<i>Ex. Biology</i>	<i>Ex. 5</i>	<i>Ex. Student 1: Left department to attend law school. Student 2: Plans to pursue a Master's degree in public policy Student 3: Left program for a job in sales at a pharmaceutical company Student 4: Unknown Student 5: Left due to illness and is currently unemployed.</i>

PARTICIPATION OF FACULTY AND EXTERNAL PARTNERS

The information in this section addresses the following RFA Items:

- Number of faculty from applicant and partner institutions who participate as mentors, instructors, preceptors for the training activities developed through program; Degree of faculty participation in activities contributing to the goals of the program.*
- Number of faculty from applicant institutions who participate by virtue of having student and/or postdocs from their laboratories engaged in training activities of the program*
- Faculty attitudes toward program training goals and time of students spent outside the laboratory; how attitudes change as a result of the program*

13a. Please explain how your institution defines faculty participation in the BEST program. Consistent with the RFA, participation by faculty includes acting as mentors, instructors, or preceptors for BEST training.

Ex. Our institution defines faculty participation as when faculty members serve as mentors in the mentorship component of BEST

13b. What strategies do you use to engage the faculty in BEST activities?

Ex. Flyers about the BEST program activities are placed in the faculty's mailboxes, presentations about BEST activities are given at faculty meetings, and BEST Principal Investigators have regular one-on-one meetings with faculty.

'Clarification: If you have faculty counted in multiple Departments/Graduate Programs, please complete Table 14a and Table 14b.

'Clarification: If you have faculty who are NOT counted in multiple Departments/Graduate Programs, please complete ONLY Table 14b.

Table 14a. Faculty with Graduate Students Participating in the BEST Program (AGGREGATE)

Column 1 Total Number of Faculty in Participating Departments/Graduate Programs <i>(Sum of Column B in Table 14b, includes those that are double counted)</i>	Column 2 Total Number of Unique Faculty in Participating Departments/Graduate Programs	Column 3 Number of Unique Faculty in Column 2 Actively Participating in the BEST Program	Column 4 Number of Faculty in Column B NOT Actively Participating in the BEST Program <i>(Formula: Column 2 minus Column 3)</i>	Column 5 Number of Faculty in Column 4 who have Graduate Students from their Labs Participating in BEST Training Activities

Table 14b. Faculty with Graduate Students Participating in the BEST Program

Note: Faculty participation is based on the definition provided in Question 13.

Data Source(s):				
Additional Comments:				
A Departments/Graduate Programs Participating in BEST	B Total Number of Faculty in Participating Departments/Graduate Programs	C Number of Faculty in Column B Participating in the BEST program	D Number of Faculty in Column B NOT Participating in the BEST Program	E Number of Faculty in Column D who have Graduate Students from their Labs Participating in BEST Training Activities
<i>Ex. Biology</i>	<i>Ex. 30</i>	<i>Ex. 10</i>	<i>Ex. 20</i>	<i>Ex. 5</i>
Total:				

'Clarification: If you have faculty counted in multiple Departments, please complete Table 15a and Table 15b.

'Clarification: If you have faculty who are NOT counted in multiple Departments, please complete ONLY Table 15b.

Table 15a. Faculty with Postdoctoral Scientists Participating in the BEST Program (AGGREGATE)

Column 1 Total Number of Faculty in Participating Departments <i>(Sum of Column B in Table 14b, includes</i>	Column 2 Total Number of Unique Faculty in Participating Departments	Column 3 Number of Unique Faculty in Column 2 Actively Participating in the BEST Program	Column 4 Number of Faculty in Column B NOT Actively Participating in the BEST Program	Column 5 Number of Faculty in Column 4 who have Postdoctoral Scientists from their Labs Participating in BEST Training Activities

<i>those that are double counted</i>			<i>(Formula: Column 2 minus Column 3)</i>	

Table 15b. Faculty with Postdoctoral Scientists Participating in the BEST Program

Note: Faculty participation is based on the definition provided in Question 13.

Data Source(s):				
Additional Comments:				
A Departments Participating in BEST	B Total Number of Faculty in Participating Departments in Column A	C Number of Faculty in Column B Actively Participating in the BEST Program as Mentors, Instructors, or Preceptors	D Number of Faculty in Column B NOT Actively Participating in the BEST Program (Formula: Column B minus Column C)	E Number of Faculty in Column D who have Postdoctoral Scientists from their Labs Participating in BEST Training Activities
<i>Ex. Biology</i>	<i>Ex. 30</i>	<i>Ex. 10</i>	<i>Ex. 20</i>	<i>Ex. 2</i>
Total:				

Table 16. Activities Offered to Faculty as Part of BEST Program

Data Source(s):		
Additional Comments:		
Activity Description	Number of Hours	Frequency
<i>Ex. Workshop on Mentoring</i>	<i>Ex. 1 hour</i>	<i>Ex. Monthly</i>

Table 17. Faculty Attitudes Regarding Career Development, Career Paths, and Careers in Academia

17a.	
What faculty attitudes are you measuring? (Drop down box: Yes, No)	Yes/No

a. Attitudes towards graduate students participation in career development activities	
b. Attitudes towards postdoctoral scientists participation in career development activities	
c. Attitudes towards graduate students considering a broad range of career paths	
d. Attitudes towards postdoctoral scientists considering a broad range of career paths	
e. Attitudes towards encouraging graduate students to pursue careers in academia	
f. Attitudes towards encouraging postdoctoral scientists to pursue careers in academia	
g. Other (please specify below)	
	g. Please specify:

17b. Please report the method(s) to assess faculty attitudes, the total number of faculty invited to participate, and the number of faculty participating.

Data Collection Method	Used? (Drop down box: Yes/No)	Total Number of Faculty Invited	Number of Faculty Respondents
a. Surveys			
b. Focus groups			
c. Interviews			
d. Other (please specify below)			
	g. Please specify:		

17c. Please provide a brief summary of the results below.

Table 18. Lists and Roles of External Partners

Data Source(s):	
Additional Comments:	

Name of External Partner Organization	Role in BEST Program	Partner Organization External to? (Drop down box: BEST program unit, University)
<i>Ex. Merck</i>	<i>Ex. Hosted internships</i>	<i>Ex. University</i>
<i>Ex. Science Writers Inc.</i>	<i>Ex. Gave seminar on science writing</i>	<i>Ex. BEST program unit</i>

Table 19. Non-NIH Sources of Funding for BEST Activities

(Note: Examples include funds for internships, travel to scientific meetings, and co-funding of courses.)

Data Source(s):				
Additional Comments:				
A Purpose	B Sources of Funding	C Nature of Funding	D Approximate Amount	E Period of Time
<i>Ex. Consultant for career coaching</i>	<i>Ex. Graduate School</i>	<i>Ex. Salary for career coaching consultant</i>	<i>Ex. \$75,000</i>	<i>Ex. 2 years</i>
<i>Ex. Internships</i>	<i>Ex. Merck</i>	<i>Ex. Stipends for five interns</i>	<i>Ex. \$30,000</i>	<i>Ex. Once in 2016</i>

Data Form

The purpose of the Data Form is to document the BEST program activities at your institution and gather the information listed in the NIH RFAs. Please read these instructions prior to completing the sections. If you have any questions, please contact Windrose Vision by phone at 703-766-4674 or by email at windrose@windrosevision.com.

The form consists of three sections: (1) Program Description and Participation in BEST Activities (reported annually); (2) Aggregate Data from Participating Departments/Graduate Programs (reported annually); and (3) Baseline Information for the Five Years Prior to Receiving the BEST Award (reported once).

SECTION 3. BASELINE INFORMATION FOR THE FIVE YEARS PRIOR TO RECEIVING THE BEST AWARD (REPORTED ONCE)

OMB# 0925-0718 EXP. DATE: 05/31/2018

Public reporting burden for this collection of information is estimated to average 30 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 (0925-0718). Do not return the completed form to this address.

Use the Secure Email File Transfer (SEFT) service to submit Section 3 of the Data Form to the NIH.

Provide aggregate data for the departments and/or graduate programs from which your institution is recruiting BEST participants. These departments are referred to in the tables as “Departments/Graduate Programs Participating in BEST.” If data are not available, please indicate that in the comment section of each table.

For awardees with BEST programs spanning multiple institutions, please report the departments/graduate programs for each institution when completing the tables. For example, if a BEST program has participants from University #1 and University #2, each participating department/graduate program from both universities would need to be reported.

- A. FIVE-YEAR REPORTING PERIOD:
 - A1. START (MM/DD/YYYY): ___ / ___ / ___
 - A2. END (MM/DD/YYYY): ___ / ___ / ___
- B. INSTITUTION NAME: _____
- C. PROGRAM NAME: _____
- D. NAME OF POINT OF CONTACT: _____
- E. EMAIL OF POINT OF CONTACT: _____
- F. DATE FORM SUBMITTED (MM/DD/YYYY): ___ / ___ / ___

ELAPSED TIME TO DOCTORATE

The information in the following table addresses the following RFA Item: Time to degree

Table 20. Elapsed Time to Doctorate (ETD)*

*Represents the total elapsed time starting from entry into the graduate program to doctoral degree completion, with leaves of absence or other enrollment lapses counting toward the ETD.

Data Sources(s):		
Additional Comments:		
A Departments/Graduate Programs Participating in BEST	B Total Number of Students who Received their Ph.D. in the 5 Years Prior to BEST Award	C Elapsed Median Time to Doctorate for Students in Column B
<i>Ex. Life Science</i>	<i>Ex. 200</i>	<i>Ex. 6 years</i>
<i>Ex. Biology</i>	<i>Ex. 100</i>	<i>Ex. 6 years</i>

CAREER PATHS OF PH.D. RECIPIENTS

The NIH RFA-RM-12-022 and RFA-RM-13-019 define a research intensive career as “an occupation in which research is performed in any venue, including industry, academic, government, or entrepreneurial pursuits,” and a research-related career as “occupations that directly support the biomedical research enterprise.” Research-related careers are those that require a doctoral degree, and may include activities such as teaching, administering research or higher education programs, science policy, or technology transfer. If the Ph.D. recipient is pursuing a career path other than the ones listed above, please classify the career as other.

Table 21. Career Paths of Ph.D. Recipients from Participating Departments/Graduate Programs

Data Sources(s) [e.g., institution exit survey, alumni survey]:		
Additional Comments:		
Career Paths	Number of Ph.D. Recipients	
a. Research intensive	<i>Ex. 23</i>	
b. Research-related	<i>Ex. 14</i>	
c. Other	<i>Ex. 1</i>	

LENGTH OF TIME IN POSTDOCTORAL POSITIONS

Table 22. Length of Time in Postdoctoral Training

Data Sources(s):		
Additional Comments:		

A Departments Participating in BEST	B Total Number of Scientists who Completed their Postdoctoral Training in the 5 Years Prior to BEST Award	C Average Length of Time in Postdoctoral Training for Scientists in Column B
<i>Ex. Life science</i>	<i>Ex. 100</i>	<i>Ex. 4 years</i>
<i>Ex. Biology</i>	<i>Ex. 75</i>	<i>Ex. 4 years</i>

6. Phone Interview Questions

OMB# 0925-0718 EXP. DATE: 05/31/2018

Public reporting burden for this collection of information is estimated to average 60 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-XXXX). Do not return the completed form to this address.

1. What do you consider your biggest success in the past year?
2. What activities have been done to expand the program at your institution?
 - a. Do you have further plans to expand to other departments in the future?
 - b. Have other departments contacted you about participating in the BEST program?
3. What are the challenges the program has faced and what strategies have been used to address the challenges?
4. How receptive are the graduate students at your institution to the BEST program?
5. How receptive are the postdoctoral scientists at your institution to the BEST program?
6. What is the culture among the faculty with regard to the BEST program? (Probe: Is there acceptance from the faculty? Resistance from the faculty? Enthusiasm from the faculty?)
 - a. What barriers, if any, exist to changing the current culture among the faculty?
 - b. How, if at all, is the BEST program helping to change the culture among the faculty?
7. What strategies are being used to conduct your local evaluation?
 - a. Have these strategies improved your BEST program?
 - b. If so, how have the strategies been used to improve your BEST program?
8. Do you have any additional thoughts you would like to share?