

## *The Mach-Gaensslen Foundation of Canada*

*Encouraging Research in Cardiology, Oncology, and Psychiatry*

### Summer Student Research Program - Follow-up Questionnaire

**(do not complete at this time)**

**an on-line survey questionnaire will be sent to you every 5 years for follow-up**

This questionnaire is designed to assist the Mach-Gaensslen Foundation with its ongoing evaluation of the Summer Student Research Program. The questionnaire is being used to measure the longer term impact of the program on your ideas, and opinions about research.

1. Name: \_\_\_\_\_  
 2. Project Title: \_\_\_\_\_  
 3. University: \_\_\_\_\_  
 4. Year of your project: \_\_\_\_\_  
 5. Current Medical Specialty: \_\_\_\_\_

**Instructions:** Please answer the following questions. Where ranking is requested, use the suggested scale: 1 = lowest ranking descriptor to 5 = highest ranking descriptor.

#	Question	Response
1	Please indicate your current status (only one response please): 1 = Resident or still in medical training; 2 = Full time researcher with no medical practice component; 3 = Full time researcher with a medical practice component; 4 = Full time medical practitioner with no research component; 5 = Full time medical practitioner with a research component;	1 ____;      2 ____; 3 ____;      4 ____; 5 ____.
2	If you are doing research, do you receive funding from external granting agencies? (NSERC; NGOs; Pharmaceutical firms; etc..)	Yes ____; No ____
3	Do you have a faculty appointment at a university medical school?	Yes ____; No ____
4	How many peer-reviewed papers have you published since your Summer Student Research Program experience?	0 - 10 ____; 11 - 20 ____; 21 - 50 ____; > 51 ____.
5	Do you believe, at this point in time, that carrying out medical research is an <u>important part</u> of a medical student's overall training?	1    2    3    4    5
6	To what extent do you believe that your Summer Student Research Program experience, as a Foundation grant recipient, was an important factor in encouraging you to enter the type of work you are now doing?	1    2    3    4    5
7	To what extent do you believe that your Summer Student Research Program experience, as a Foundation grant recipient, is an important factor in how you carry out your <u>current day to day</u> activities?	1    2    3    4    5
8	To what degree was your Summer Student Research Program participation a valuable learning experience in your current practice?	1    2    3    4    5
9	Are you interested in assisting the Mach-Gaensslen Foundation with future activities?	Yes ____; No ____

**Thank you very much for your participation**