

The Mach-Gaensslen Foundation of Canada

Encouraging Research in Cardiology, Oncology, and Psychiatry

Summer Student Research Program

POST-Research Questionnaire - Date: _____

(to be submitted by October 30)

This questionnaire is designed to assist the Foundation with its ongoing evaluation of the Summer Student Research Program. The questionnaire is being used to measure the immediate impact of the program on your ideas and attitudes about research. You will be asked to complete this questionnaire at the end (return by October 30th) of your Summer Student Research Program experience.

1. Name: _____
2. Project Title: _____
3. University: _____
4. Faculty advisor: _____
5. Field of Research _____ (cardiology, oncology, psychiatry)

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

#	Question	Response
1	Have you ever done a defined research project (i.e. one that includes hypothesis generation, hypothesis testing, evidence gathering, analysis, and conclusions)?	Yes _____; No _____
2	If "Yes", was this a study in a medically related discipline ?	Yes _____; No _____
3	To what extent do you feel that the topic chosen for this Summer Student Research Program would be of particular interest to you, on an ongoing basis.	1 2 3 4 5
4	To what degree do you believe that carrying out medical research is an important part of a medical student's overall training ?	1 2 3 4 5
5	To what extent do you believe that a summer student research project can lead to significant findings relevant to the field of study ?	1 2 3 4 5
6	To what extent are you interested in medical research as a full time career choice ?	1 2 3 4 5
7	If you do not become a full time medical researcher, to what extent do you believe that medical research (formal or informal/action research) will be an ongoing part of your practice of medicine?	1 2 3 4 5

Thank you very much for your participation !