

Class of 2026 Application Reference Sheet for FELLOWS

This document is designed to help prospective applicants to the CDC Evaluation Fellowship Program prepare their responses before entering them into CDC's Enterprise Fellowship Management System (eFMS). For more information about the fellowship— including eligibility criteria, deadlines, and access to the application portal, please visit CDC Evaluation Fellowship Program | CDC.

Below are the main sections of the application and the types of information applicants will need to provide. Please note: This is not a user guide to navigating the eFMS system. In the event there are any discrepancies between this reference sheet and eFMS, please defer to the eFMS version. For questions, please email evaluationfellowship@cdc.gov

Applicant profile page

- Name, address, and contact information
- An emergency contact

Application section: Citizenship

The CDC Evaluation Fellowship Program is only accepting applications from U.S. citizens and permanent residents with an active green card. The green card must be valid from the start of the fellowship (mid-Aug) through the duration of the fellowship (at least two more years).

Field or question	Type of response
Country of Citizenship:	Multiple Choice
Are you a U.S. permanent resident?	Yes/No

Application Section: Document uploads

Document Upload Instructions: Please upload your resume/cv. Your resume heading must include your full name, address, personal email address (no school or work emails), and your phone number. Also, please include the full date range for each role listed (e.g. 01/01/2025 - 02/01/2025).

- Resume/cv
- Unofficial transcripts of qualifying degree(s) (graduate degrees only)
- A copy of your green card with expiration date past end of two-year fellowship (if applicable)

Application Section: Education

v.11/21/2025 1

CDC/ Public Health Infrastructure Center/ Division of Workforce Development

Field or question	Response type
What is the highest degree you will have attained by the start of the program?	Multiple Choice
For each pertinent graduate degree	
Has your degree been conferred? (i.e., Have you received your degree)	Yes/No
Degree Conferral Date:	Date
Major 1:	Short Text
Major Classification:	Multiple choice
Country:	Multiple choice
State/Province	Multiple choice
College/University:	Multiple choice

Application Section: Evaluation experience and personal statements

Field or question	Response type
How would you assess your current level of knowledge/skill for program evaluation?	Multiple choice
How many years of experience do you have in program evaluation?	Number
List any special skills, research topics/experience, or other areas of expertise that you have.	Long Text [<250 words]
Briefly provide some information on your formal training (classroom or otherwise) where all or part of the focus was on program evaluation approaches, methods, techniques, etc. In your response, specifically list courses, formal trainings, etc. that were program evaluation focused.	Long Text [<250 words]
Describe the two most important skills you want to develop or improve during this program	Long Text [<250 words]
Please describe what qualifies you for the CDC Evaluation Fellowship Program	Long Text [<250 words]
Describe how this program will help you achieve your goals	Long Text [<250 words]

Application Section: Work & Volunteer Experience

Field or question	Response type
Briefly describe up to three program evaluation projects you worked on. In your response, please <u>list the specific steps of the CDC Program Evaluation Framework</u> that were used to complete the project and describe how they were applied. Lastly, please include your role in the project (e.g., lead; support; data collection only; data analysis only; etc.), evaluation approach and methods used for the project (≤200 words per project).	Long Text X 3 options [<250 words each]
Effective program evaluation involves collaborating with a variety of interest holders from different professional backgrounds. Please describe a time when you collaborated with others on a professional project or activity. In your response, include the following:	Long Text [<250 words]

v.11/21/2025 2

Your role in the collaboration and your approach to ensuring effective teamwork.	
 Any conflicts that arose during the collaboration and how you addressed and resolved them. If no conflicts occurred, please describe your general approach to managing conflicts in team or group activities. (≤300 words) 	
Have you participated in any CDC fellowship programs?	Yes/No
(if "Yes" to previous question). Please select all CDC fellowships that you have participated in:	Multiple Selection

Recommendation request

Candidates are required to provide and request two (2) confidential recommendations through the eFMS portal. Recommenders will receive a personalized email request to complete the recommendation within the eFMS system. Here is the information that each applicant needs to be prepared to provide for each recommender:

Field or question	Response type
Recommender's Name:	Open text response
Organization:	Open text response
Job Title:	Open text response
Phone:	Open text response
Email:	Open text response
Relationship to you:	Open text response
Note to the recommender:	Open text response
Letter of Recommendation Waiver Agreement: "In order to be considered	
for the fellowship program, I agree to waive my right to view any recommendations submitted for me."	Affirmation check box

v.11/21/2025 3