The Office of Surface Mining Reclamation and Enforcement recently provided a technology transfer project or activity as listed below. Your response to this survey will assist us in evaluating and improving our performance as required by the Government Performance and Results Act. Your response is voluntary.

Technology Transfer Event Title: ________________________________________________

Agency/Organization Assisted:  _________________________________________________

Dates Held:   Beginning Date:   __/__/____       Ending Date:  __/__/____

Name/Location of Sponsoring OSM Office: _______________________________________

Type of Technology Transfer Event:

Workshop  [ ]  Presentation  [ ]

Webinar  [ ]  Consultation  [ ]

Other  [ ] Please describe __________________________________

Please rate us using the following scale: (Please circle)

1. Please rate the quality of our assistance:  1  2  3  4  5

2. Please rate our professionalism and courtesy:  1  2  3  4  5

3. Please rate how well we met your objectives:  1  2  3  4  5

4. Please rate your overall satisfaction:  1  2  3  4  5

5. How may we improve our service to you, or do you have any additional comments: ___________

Your Name ___________________________ Date ________________

Return to: Office of Surface Mining Reclamation and Enforcement or Fax to: (organization’s fax) or e-mail to ___________@osmre.gov

(Organization Name)  (Organization Address)

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501) requires us to inform you that: Federal Agencies 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. This information is being collected in order to better serve you in the future and as part of OSM’s performance of its responsibilities under the Government Performance and Results Act. The obligation to respond is voluntary.

Public reporting burden for this form is estimated to average 5 minutes per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 203 SIB, 1951 Constitution Ave, NW, Washington, D.C. 20240.