

## Neighborhood Networks Survey

Please take a moment to complete this survey on broadband availability and usage at Neighborhood Networks Centers. When you're done, return questionnaires via e-mail to <a href="mailto:xxx@hud.gov">xxx@hud.gov</a> or fax to XXX-XXX. If you have jurisdiction over more than one Center, please complete this form for each one. You may provide further comments on additional pages, if needed.

Center Name		
Development(s) Served by this Center:		
	Are computers in this Center connected to broadband internet service? Cable, DSL, fiber optic or wireless are broadband; dial-up modem is NOT.  Yes	
	□ No	
3.	What are the operating hours of this Neighborhood Networks Center?	
4.	On average, how many unique visitors does your Center get a week?	
	Does this center offer educational or training programs for <b>children</b> ? If Yes, how many participants attend a typical program?  Yes	
	□ No	
	How Frequently are programs held? Weekly? Monthly? Other?	
	Average # of Participants	

	oes this center offer educational or training programs for <u>adults</u> ? If Yes, how many participants attend a rpical program?
د)	Yes
	$\square$ No
	How Frequently are programs held? Weekly? Monthly? Other?
	Average # of Participants
	oes this center offer educational or training programs for <u>senior citizens</u> ? If Yes, how many participants attend typical program?  — Yes
	□ No
	How Frequently are programs held? Weekly? Monthly? Other?
	Average # of Participants
	the last five years, have you conducted any studies of the benefits of Neighborhood Networks Centers for your property? <b>If please attach the study and its findings</b> .
	□ Yes
	$\square$ No
Add	litional Comments

## Thank you for your participation!

Public reporting burden for this collection of information is estimated to average .25 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected for a broadband research project and will be used to develop new broadband policies at HUD. Response to this request is voluntary. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. No confidentiality is assured.