You must register to download EARS. The registration information you provide will be used by the EARS Team to understand our user base so we may improve EARS. We may also use your e-mail address, in rare instances, to notify you of updates or technical issues and solutions.

*required field

Section 1: Please provide the business contact information for the person who will be using EARS.

Salutation:	
First Name: *	
Last Name: *	
Job/Position Title:	
Business/Work Email Address: *	
Business/Work Phone:	

Section 2: Please tell us about your business organization.

Organization Name: *	
Organization Country: *	
Organization State/Territory: *	

Organization Type: *
- ⦿ US Government
  - ⦿ Local/City/County
  - ○ State/Territory/Tribal
  - ○ National/Federal
- ○ Foreign Government
- ○ Non-Governmental Organization
- ○ Hospital/Healthcare/Laboratory
- ○ Academic institution
- ○ Corporation/Business
- ○ Other

Section 3: What type of data do you plan to use EARS for?

- ☐ Education

- [ ] Employee/School Absenteeism
- [ ] Environmental/Natural resources
- [ ] Health/Medical care
- [ ] Veterinary
- [ ] Industrial/Commercial
- [ ] Pharmacy/Over the Counter Drug Sales
- [ ] Judicial
- [ ] Law enforcement/911
- [ ] Military
- [ ] Other

Section 4: Please characterize your prior methods and frequency of EARS use:

Methods: *
- ○ I have never used EARS before
- ○ I use the EARS software as is or have made slight modifications to customize it
- ○ I only borrowed portions of the program/code

Frequency: *
- ○ I have never used EARS before
- ● Infrequent user (less than once per month)
- ○ Occasional user (approximately once per month)
- ○ Regular user (One or more times per week)

Section 5: We are interested in tailoring EARS to fit your needs. If you have used the EARS before please answer the following questions. (optional)

Please tell us what you like *most* about EARS:

Please tell us what you like *least* about EARS:

Please provide suggestions for improvement:	

If you would rather talk to someone about EARS to tell us your recommendations and notify us of problems and suggestions please let us know via ears@cdc.gov and someone from the EARS Team will call you.

Thank you for completing the registration questions. Submit your registration information to download EARS.

Submit Registration to EARS