

# Disability Awareness Campaign - Fact Sheet Survey

## Organization

**\* 1. Name of your organization, company, or agency**

## Fact Sheets

**2. When you used the fact sheet, Facts About Social Security's Disability Program, how did you provide it to the public?**

- Printouts
- A link to the fact sheet from my organization's website

Other (please specify)

## Prints

**3. How many fact sheets printouts did you distribute?**

## Quality

**4. How would you rate the quality of the fact sheet?**

- Excellent
- Above average
- Average
- Below average
- Poor

# Disability Awareness Campaign - Newsletter Articles Survey

## Organization

**\* 1. Name of your organization, company, or agency**

**2. Has your organization printed any of the newsletter articles either online or in a printed newsletter?**

- Yes  
 No

## Newsletter Information

**3. What is the name of your organization's newsletter?**

**4. How many subscribers does your newsletter have?**

**5. If your organization used any of the following articles, please indicate the date of the post.**

	MM		DD		YYYY
1	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
2	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
3	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>

## Rate Newsletter Articles

**6. How would you rate the overall quality of the newsletter articles provided?**

- Excellent  
 Above average  
 Average  
 Below average  
 Poor

## Disability Awareness Campaign - Newsletter Articles Survey

### 7. What other newsletter articles would you like to see on the "Disability Materials for Groups and Organizations" web page?

OMB Control No. 0960-0788

Paperwork Reduction Act Statement

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 2 minutes to complete this survey. You may send comments on our time estimate above: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address.

# Disability Awareness Campaign - Poster Survey

## Types of Media

**\* 1. Name of your organization, company, or agency**

## Posters

**2. Which of the following posters did you print and distribute? Select all that apply.**

- Amputee & Post-Traumatic Stress Disorder
- Spinal Cord Injury
- Clinical Depression
- Vision Impairment
- Brittle Bone Disease
- Down Syndrome
- Cerebral Palsy
- Multiple Sclerosis
- Schizophrenia
- Breast Cancer
- Congenital Disorder
- Hearing Impairment
- Social Security works aggressively to prevent, detect and prosecute fraud (SSN Card)
- Social Security works aggressively to prevent, detect and prosecute fraud (Man & Computer)
- Facts About Social Security's Disability Program (colorful)
- Facts About Social Security's Disability Program (list version)
- Did you know: Social Security disability insurance makes it possible...
- Did you know: People who receive Social Security disability payments...

**3. In total, about how many posters did you distribute?**

Number

# Disability Awareness Campaign - Poster Survey

## 4. How would you rate the quality of the poster(s)?

- Excellent
- Above average
- Average
- Below average
- Poor

## 5. What other posters would you like to see on the "Disability Materials for Groups and Organizations" web page?

OMB Control No. 0960-0788

Paperwork Reduction Act Statement

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 2 minutes to complete this survey. You may send comments on our time estimate above: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address.

# Disability Awareness Campaign - PowerPoint Survey

## Organization

**\* 1. Name of your organization, company, or agency**

## PowerPoint Slides

**2. Has your organization used the PowerPoint, "Social Security's Disability Programs" in any presentations?**

- Yes  
 No

## Your Presentations

**3. If your organization used the PowerPoint, "Social Security's Disability Programs," what was/were the date(s) of your presentation(s)?**

	MM	DD	YYYY
Date 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date 5	<input type="text"/>	<input type="text"/>	<input type="text"/>

**4. What was the audience size for each of your presentations?**

Date 1	<input type="text"/>
Date 2	<input type="text"/>
Date 3	<input type="text"/>
Date 4	<input type="text"/>
Date 5	<input type="text"/>

## Rate PowerPoint

## Disability Awareness Campaign - PowerPoint Survey

### 5. How would you rate the quality of the PowerPoint provided?

- Excellent
- Above average
- Average
- Below average
- Poor

### 6. What other PowerPoint presentations would you like to see on the "Disability Materials for Groups and Organizations" web page?

OMB Control No. 0960-0788

Paperwork Reduction Act Statement

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 2 minutes to complete this survey. You may send comments on our time estimate above: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address.

# Disability Awareness Campaign - Social Media Survey

## Organization

**\* 1. Name of your organization, company, or agency**

## Social Media - Facebook

**2. Does your organization have a FaceBook page?**

- Yes  
 No

## FaceBook

**3. How many friends follow your organization's FaceBook page?**

**4. If your organization posted any of the following social media posts to FaceBook, please indicate the date of the post.**

	MM	DD	YYYY
The Social Security Act sets out a very strict definition of disability	<input type="text"/>	<input type="text"/>	<input type="text"/>
Severe disabilities often mean a shorter time collecting benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
The onset of disability is unpredictable and can happen to anyone at any age	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security disability is insurance coverage that workers earn	<input type="text"/>	<input type="text"/>	<input type="text"/>
As experts projected for decades, Social Security claims have increased significantly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Disability payments are modest	<input type="text"/>	<input type="text"/>	<input type="text"/>

**5. How would you rate the quality of the materials provided?**

- Excellent  
 Above average  
 Average  
 Below average  
 Poor

## Social Media - Twitter



# Disability Awareness Campaign - Social Media Survey

## 6. Does your organization have a Twitter account?

- Yes
- No

## Twitter

## 7. How many followers does your organization's Twitter account have?

## 8. If your organization posted any of the following social media posts to Twitter, please indicate the date of the post.

	MM	DD	YYYY
The Social Security Act sets out a very strict definition of disability	<input type="text"/>	<input type="text"/>	<input type="text"/>
Severe disabilities often mean a shorter time collecting benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
The onset of disability is unpredictable and can happen to anyone at any age	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security disability is insurance coverage that workers earn	<input type="text"/>	<input type="text"/>	<input type="text"/>
As experts projected for decades, Social Security claims have increased significantly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Disability payments are modest	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 9. How would you rate the quality of the materials provided?

- Excellent
- Above average
- Average
- Below average
- Poor

## Other Social Media

## 10. Does your organization use some other type of social media?

- Yes
- No

## Other Social Media

## 11. What other type(s) of social media does your organization use?

# Disability Awareness Campaign - Social Media Survey

**12. How many people do you reach with your organization's other account?**

**13. If your organization posted any of the following social media posts to your organization's other social media account, please indicate the date of the post.**

	MM	DD	YYYY
The Social Security Act sets out a very strict definition of disability	<input type="text"/>	<input type="text"/>	<input type="text"/>
Severe disabilities often mean a shorter time collecting benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>
The onset of disability is unpredictable and can happen to anyone at any age	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security disability is insurance coverage that workers earn	<input type="text"/>	<input type="text"/>	<input type="text"/>
As experts projected for decades, Social Security claims have increased significantly	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Disability payments are modest	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Wish List

**14. What other social media materials would you like to see?**

OMB Control No. 0960-0788

Paperwork Reduction Act Statement

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 2 minutes to complete this survey. You may send comments on our time estimate above: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address.

# Disability Awareness Campaign - Video Survey

## Organization

**\* 1. Name of your organization, company, or agency**

## Shared Videos

**2. From the list of videos below, indicate those which you shared on You Tube by showing the date of the post.**

	MM	DD	YYYY
Personal Interview Video – Sarah	<input type="text"/>	<input type="text"/>	<input type="text"/>
Personal Interview Video – Richard	<input type="text"/>	<input type="text"/>	<input type="text"/>
Personal Interview Video – Erika	<input type="text"/>	<input type="text"/>	<input type="text"/>
Personal Interview Video – Karen	<input type="text"/>	<input type="text"/>	<input type="text"/>
Personal Interview Video – Carrie	<input type="text"/>	<input type="text"/>	<input type="text"/>
Personal Interview Video – William	<input type="text"/>	<input type="text"/>	<input type="text"/>
American Sign Language Video – Social Security, SSI and Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Rate Videos

**3. How would you rate the quality of the video(s) provided?**

- Excellent
- Above average
- Average
- Below average
- Poor

**4. What other videos would you like to see on the "Disability Materials for Groups and Organizations" web page?**

# Disability Awareness Campaign - Web Widget Survey

## Organization

**\* 1. Name of your organization, company, or agency**

## Web Widgets

**2. From the list of logos below, indicate which you used on your website by showing the date of the post.**

	MM	DD	YYYY
FACES AND FACTS OF DISABILITY – Round	<input type="text"/>	<input type="text"/>	<input type="text"/>
FACES AND FACTS OF DISABILITY– Square	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Rate Web Widgets

**3. How would you rate the quality of the web widget(s) provided?**

- Excellent
- Above average
- Average
- Below average
- Poor

**4. What other web widgets would you like to see on the "Disability Materials for Groups and Organizations" web page?**

OMB Control No. 0960-0788

### Paperwork Reduction Act Statement

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 2 minutes to complete this survey. You may send comments on our time estimate above: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address.