Webcast Survey: Social Security, SSI, and Medicare – What you need to know about these Vital programs in American Sign Language

Thank you for agreeing to participate in Social Security's survey for the webcast on Social Security, SSI, and Medicare - What you need to know about these vital programs in American Sign Language. Your comments will help us improve our outreach and future webcasts and webinars.

outreach a	and future webcasts and webinars.
How woul	d you rate the following aspects of the webcast?
1a. Use of	a webcast to present this type of information
\mathbf{O}	Excellent
\mathbf{O}	Good
\mathbf{O}	Fair
O	Poor
1b. Overal	I value of the webcast to you
\mathbf{O}	Excellent
\mathbf{O}	Good
\mathbf{C}	Fair
O	Poor
1c. Clarity	of information provided
\mathbf{C}	Excellent
\mathbf{C}	Good
\mathbf{O}	Fair
O	Poor
1d. Releva	ance of information provided
\mathbf{C}	Excellent
\mathbf{C}	Good
\mathbf{C}	Fair
O	Poor
-	elected "fair" or "poor" for any aspects of the webcast, please explain se identify each item you are referring to in your comments.

3. Prior to the webcast, what was your main source of information about Social

Security, SSI, and Medicare?

 \mathbf{O}

I was not aware of them at all

	\mathbf{O}	I learned about them from a family member or friends
	\mathbf{O}	I read about them on Social Security's website
	\mathbf{O}	I heard about them from a Social Security employee
	O	I learned about them from Social Media (specify Twitter, Facebook, etc)
	O	Other (please explain)
4. H o	ow did	the webcast affect your understanding of Social Security, SSI, and
	icare?	
	0	Increased Significantly
	O	Increased Somewhat
	O	Not At All
	O	Decreased Somewhat
	O	Decreased Significantly
5.	Wha	at actions are you likely to take as a result of watching the webcast?
(Sel		that apply)
		I will visit Social Security's website for more information
		I will call Social Security's 800 number
		I will recommend the use of Social Security's website to others
		I will recommend the use of Social Security's 800 number to others
		I/We will recommend the webcast to others
		I/We will watch future Social Security webcasts
		Other (specify)
6. Pl	ease p	provide any additional comments or questions about the webcast.
7 D I	aasa n	provide suggestions for future webcast or webinar topics.
/ . F I		
о ц	ow did	you learn about the webcast? (Select all that apply)
о. п		I saw it on Facebook, Twitter, or other social networking site
		I heard about it from a family member or friend
	_	
		I saw it on the Social Security website
		I heard about it from a Social Security employee
		I heard about it from my local advocate group (for example, newsletter or
		website)
		Other (specify)
9. Pl		lescribe yourself. (Select only one)
	\mathbf{O}	I am deaf or hard of hearing

\mathbf{C}	I am a family member or friend of someone who is deaf or hard of hearing
O	I represent an organization for the deaf and hard of hearing
O	I represent an organization that assists in or provides services to the
	elderly and/or disabled
O	I am a Social Security employee
O	I am a member of the media
\mathbf{O}	Other (specify)

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 3 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.