**OMB Control No. 2501-XXXX**

 **Expiration Date: XX/XX/XXXX**

**HUD Stakeholder Survey**

Thank you for participating in [event name and date]. We value your feedback, so please take a minute to let us know what you think.

**What is your affiliation? (Please check all that apply.)**

* Academia
* Advocacy & Public Interest Groups
* Assisted Housing Resident (Public Housing, Section 8, Senior Housing, etc)
* Business (Corporate, Chambers of Commerce, Small Business)
* Civil Rights and Constituency Organizations
* Congressional Members or staff
* Faith-Based Organization
* Housing Financers & Lenders
* HUD grantee
* Legal Community
* Local Government (state, regional, county or municipal)
* Nonprofit Organization
* Organized Labor
* Philanthropic Organization
* Public Housing Authority
* Other (please specify)

**Please rate your satisfaction with this session.**

*Very dissatisfied Very satisfied*

 1 2 3 4 5

**How familiar were you with the subject matter BEFORE this session?**

*Not at all familiar Very familiar*

 1 2 3 4 5

**What was your impression of the subject matter BEFORE this session?**

*Very unfavorable Very favorable*

 1 2 3 4 5

**What is your impression of the subject matter AFTER this session?**

*Very unfavorable Very favorable*

 1 2 3 4 5

**Are you likely to inform others about the subject discussed at this session?**

*Very unlikely* *Very likely*

 1 2 3 4 5

**What was the most useful aspect of this session?**

**How do you think the session could have been improved?**

**Additional Comments:**