

Survey of Reserve Partners and Stakeholders

The National Oceanic and Atmospheric Administration Office of Ocean and Coastal Resource Management (OCRM) conducts periodic evaluations of national estuarine research reserves as required by the Coastal Zone Management Act. As part of the evaluation of [name] Reserve, OCRM would like to obtain your perspective and opinion on the reserve's implementation of its programs and activities from [Month 20XX to Month 20XX]. Please note that the word "you" in the following questions refers to an organization or a person, as appropriate. If there are questions that do not apply to you, you may skip them.

Thank you for your participation in this survey.

1. How well do you think the reserve is doing in addressing the following four National Estuarine Research Reserve System priorities:

a. Providing opportunities for research and monitoring.

| | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Excellent | Good | Adequate | Poor | Very Poor | No Opinion |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Comments

b. Enhancing public awareness and understanding of estuarine areas through public education and interpretation opportunities.

| | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Excellent | Good | Adequate | Poor | Very Poor | No Opinion |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Comments

c. Providing coastal decision makers with knowledge and tools to address critical resource management issues through the Coastal Training Program.

| | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Excellent | Good | Adequate | Poor | Very Poor | No Opinion |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Comments

d. Protecting and restoring the reserve's resources.

| | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Excellent | Good | Adequate | Poor | Very Poor | Unknown |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Comments

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2. What are the reserve's top one to three strengths?

Strength_1

Strength_2

Strength_3

3. What are the reserve's top one to three accomplishments?

Accomplishment_1

Accomplishment_2

Accomplishment_3

4. What are the reserve's one to three biggest weaknesses?

Weakness_1

Weakness_2

Weakness_3

5. What are the reserve's top one to three challenges faced?

Challenge/Issue_1

Challenge/Issue_2

Challenge/Issue_3

6. Describe your working relationship with the reserve.

7. Describe any areas or ways in which your relationship with the reserve could be strengthened.

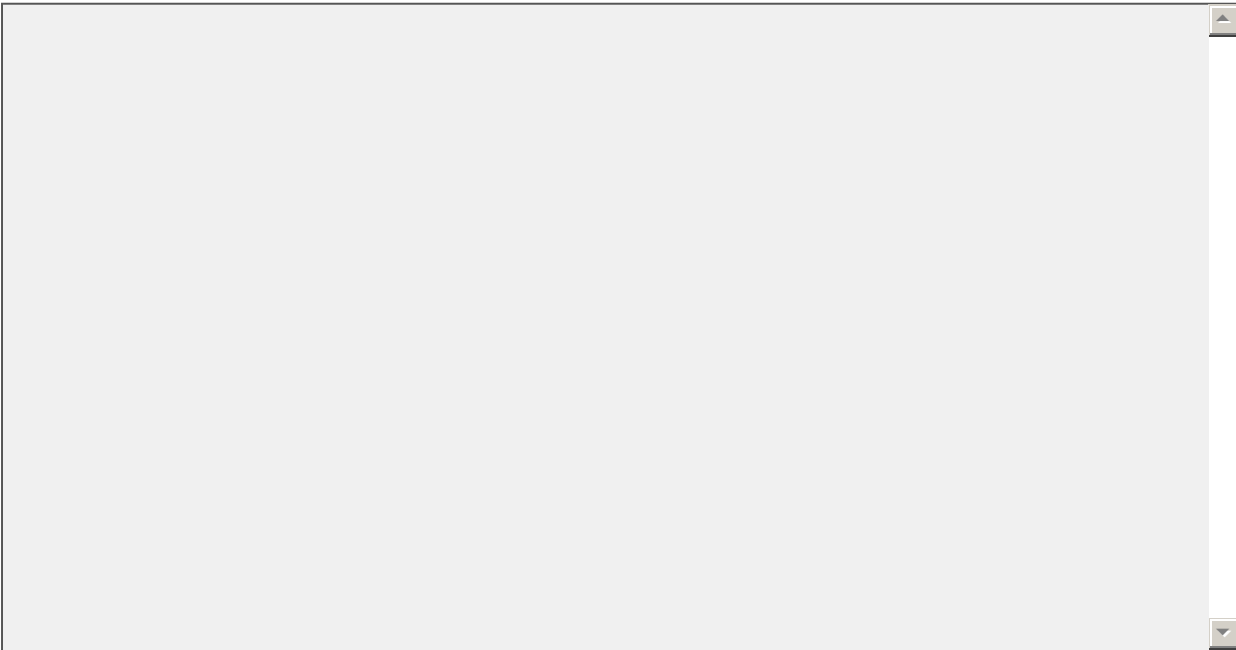
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8. Describe one to three major collaborations your organization had with the reserve to implement programs, initiatives, projects or activities.

Consider including:

- a. goal of the collaboration**
- b. major activities undertaken**
- c. funding provided by the reserve and by your organization**
- d. technical assistance, research results, and/or monitoring data from the Reserve that your organization used and its value to the collaboration**
- e. short- and long-term impacts and the results of the collaboration**
- f. how the collaboration helped your organization achieve its mission and goals**

a. Collaboration 1

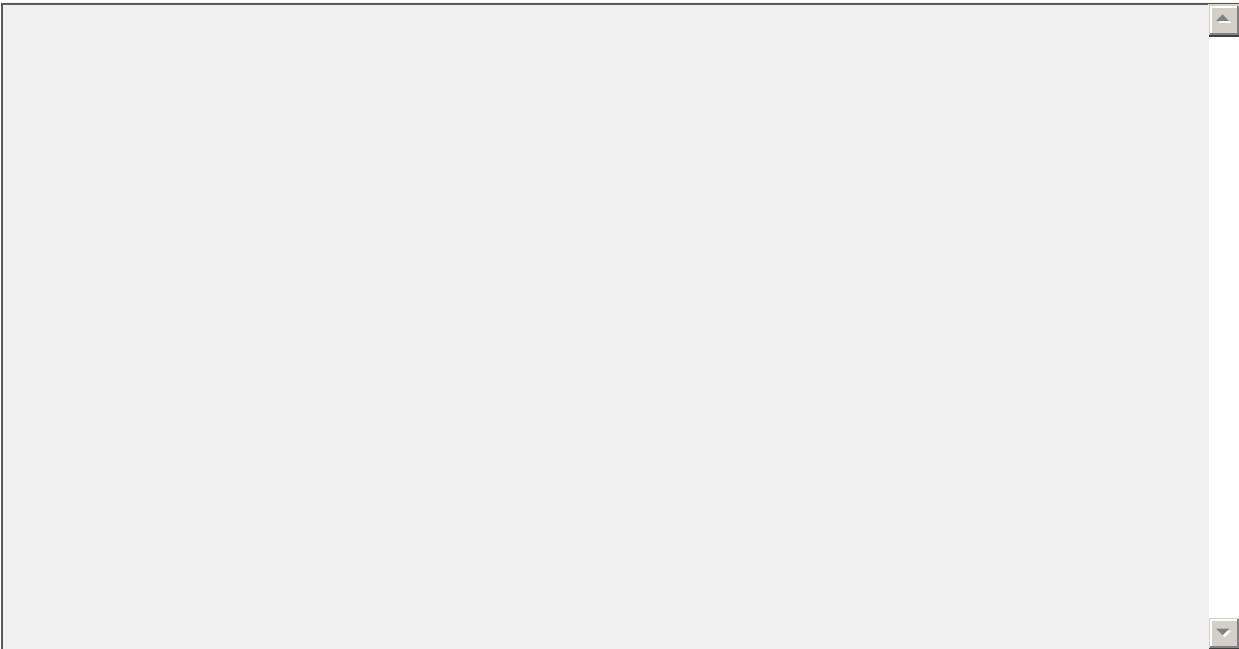


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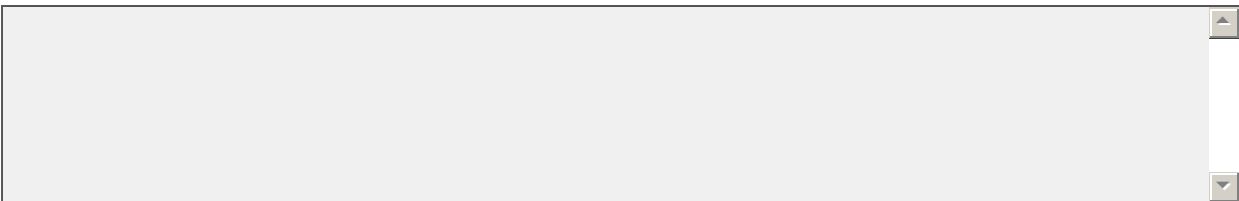
b. Collaboration 2

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c. Collaboration 3

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9. Describe any priority opportunities for additional collaborations to further the reserve's mission of research, education, and stewardship.

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10. Do you have any recommendations for changes the reserve could make to improve its effectiveness?

11. Is there anything else you would like to share?

12. Choose the category which best describes who you represent.

- Local Government
- State Government
- Federal Government
- Business/Industry
- Nonprofit/Nongovernmental Organization
- Academia

Other (please specify)

13. OPTIONAL: Provide your name.

OMB Control # 0648-XXXX, expires month/date/year. OCRM requires this information in order to adequately evaluate the ongoing approval and financial eligibility of CZMA national estuarine research reserves. Public reporting burden for this collection of information is estimated to average 30 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Kate Barba, Chief, National Policy and Evaluation Division, OCRM, 1305 East-West Hwy., N/ORM7, Silver Spring, Maryland 20910. This reporting is required under and is authorized under 16 U.S.C. 1458(a). Information submitted will be treated as public records; however, the identity of a respondent will be protected if the respondent's comments and responses are released. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection displays a currently valid OMB Control Number.