

**Survey about the Engagement of Partners in the
[INSERT NAME OF ADD-US-IN CONSORTIA HERE]
Invitation to Participate in a Web-Based Survey**

Dear Grantee:

The Office of Disability Employment Policy of the U.S. Department of Labor (DOL-ODEP) recently sent an advance notice that encourages responses to the **Survey of Partner Engagement**. We are interested in obtaining your perceptions of your partnership with [INSERT NAME OF ADD-US-IN CONSORTIA HERE]. DOL-ODEP is working with IMPAQ International, LLC (IMPAQ), to conduct a Web-based survey to obtain this information.

The purpose of the **Survey of Partner Engagement** is to gather information about the work and collaboration of [INSERT NAME OF ADD-US-IN CONSORTIA HERE] partners, and whether they have experienced any change in how they think or what they do when they interact with individuals with disabilities. The survey should only take about fifteen minutes to complete and your participation is voluntary. Your answers will be kept private to the extent permitted by law, you will not be asked to provide personal identifiers such as your name or address, and you will never be identified in any report based on the survey.

Your link for accessing your survey is: [LINK]

Your token is: [TOKEN]

We would like to have your completed survey response by [Month XX]. This survey and your responses are very important to us, and we will follow-up with you to answer any questions or concerns you may have regarding the survey and confirm your participation. However, if you have immediate concerns, please do not hesitate to contact Lisa Lin-Freeman from IMPAQ at (443) 539-1396 or lfreeman@impagint.com .

Thank you in advance for your time and effort!

Sincerely,

Anne Chamberlain
Senior Research Associate
IMPAQ International, LLC

Paperwork Reduction Act Statement

A Federal agency may not conduct or sponsor, and a person is not required to respond to this collection of information, unless it displays a currently valid OMB control number. Your obligation to reply to this survey is voluntary. The public burden for this survey is estimated at 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the necessary data, and completing and reviewing the collection of information. Send comments concerning this burden estimate or any other aspect of this collection of information to the US Dept. of Labor, Office of Disability Employment Policy, 200 Constitution Ave, Washington DC 20210.OMB Control Number: 1225-0059 Expiration Date: 01/31/2016