**OMB Number: 2900-0770  
Respondent Burden: 2 minutes  
Expiration Date: xx/xx/xxxx**

The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Paperwork Reduction Act of 1995. The public reporting burden for this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, and completing and reviewing the collection of information. No person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Customer satisfaction surveys are used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this survey will lead to improvements in the quality of service delivery by helping to shape the direction and focus of specific programs and services. Submission of this form is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

**Learning Sessions   
Satisfaction Survey**

Personally identifiable information is not required. Your responses will be incorporated with the answers provided by other respondents.

**1. How would you rate the overall Return on Investment (ROI) you received through the Learning Session (LS) you attended?**

5 ☐Excellent 4 ☐Very Good 3 ☐Good 2 ☐Fair 1 ☐Poor

**2. How would you rate the relevance to your business of the information received at the LS?**   
  
 5 ☐Excellent 4 ☐Very Good 3 ☐Good 2 ☐Fair 1 ☐Poor

**3. How would you rate the speaker’s knowledge about the information presented on this session?**

5 ☐Excellent 4 ☐Very Good 3 ☐Good 2 ☐Fair 1 ☐Poor

**4. Do you feel the training objectives were met?**

5 ☐Definitely yes 4 ☐Probably yes 3 ☐Don’t know 2 ☐Probably not 1 ☐Definitely not

**5. How would you rate the amount and importance of the information you learned at this LS?**

5 ☐Very high 4 ☐High 3 ☐Moderate 2 ☐Low 1 ☐Very low

**6. Please identify the LS you attended. (It could be by topic, industry, company, VISN, name of the speaker).  
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**7. Please share any additional comments or suggestions in regards to this LS.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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***Thank you for your participation!  
We look forward to seeing you at our next VA engagement event!***