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

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Senior Leader Roundtable Satisfaction Survey

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

Round	dtable (SLR) you atten 5 □Excellent	4 □Very Good	3 □Good	2 □Fair	1 □Poor	
2. Hov Leade	-	elevance to your l	ousiness of t	he informatio	on received from the Senior	
	5 □Excellent	4 □Very Good	3 □Good	2 □Fair	1 □Poor	
3. Hov	v would you rate the s	peaker's knowled	ge about the	topics discu	ussed on this session?	
	5 □Excellent	4 □Very Good	3 □Good	2 □Fair	1 □Poor	
4. Ho	w do you rate the valu	e of the connection	ons you mad	e at the SLR	?	
	5 □Excellent	4 □Very Good	3 □Good	2 □Fair	1 □Poor	
5. Please identify the SLR you attended. (It could be by topic, industry VISN, name of the speaker).						
6. Please share any additional comments or suggestions in regards to the Senior Leader Roundtable you attended.						

Thank you for your participation!
We look forward to seeing you at our next VA engagement event!