

**Private Industry Feedback Survey**

**Paperwork Burden Notice**

The public reporting burden to complete this information collection is estimated at 3 minutes per response, including the time completing and reviewing the collected information. The collection of this information is voluntary. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to FBI Headquarters, 935 Pennsylvania Ave N. W. Washington, DC 20535, ATTN: Paul Konschak, Cyber Division, Cyber Outreach Section.

**1. Please select the product for which you are providing feedback from the drop down menu below.**

 http://www.statsilk.com/files/images/dropdown.png

**2. How would you rate this product overall?**

Poor FairAverageGoodExcellent 

**3. The information provided was relevant and useful.**

Strongly Disagree DisagreeNeither Agree nor DisagreeAgreeStrongly Agree

**4. The information provided was timely for the appropriate action.**

Strongly Disagree DisagreeNeither Agree nor DisagreeAgreeStrongly Agree

**5. What was most helpful about the information?**



**6. Please provide suggestions or any other overall comments as to how our reporting can be improved.**



**7. How likely are you to share this product with an associate or colleague?**

 Extremely Unlikely Unlikely Neutral Likely Extremely Likely

**8. Which category best describes your job title?**

Analyst CSO CISO Engineer Executive Legal Other (Please specify)

Specify other value 

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| **9. Which, if any, of these critical infrastructure sectors does your organization primarily associate, manage, maintain, or service?** |
| http://www.statsilk.com/files/images/dropdown.png |  |

Your contact information is not required to submit feedback using this form. However, if you would like to be contacted regarding this survey, please provide the information below.

Thank you.

Name of company or organization?



Your Name

 

First Last

Telephone  (XXX-XXX-XXXX)

Email Address 