## **FSA Outreach Presentation Evaluation**

Thank you for attending a Federal Student Aid presentation. The purpose of this survey is to receive feedback on how FSA can better serve you.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0045. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. If you have comments or concerns regarding the status of your individual submission of this survey, please contact the Office of Federal Student Aid 830 First Street NE Washington DC 20202 directly.

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- Student
- Parent/Guardian
- Borrower in Repayment
- College Access Professional
- Other [please specify]

1. What is your overall evaluation of the presentation?

Poor	Fair	Average	Good	Excellent
1	2	3	4	5

Comments:

2. Please share your evaluation of the presenter.

Poor	Fair	Average	Good	Excellent
1	2	3	4	5

Comments:

3. Name at least one thing you would **not** change about the presentation.

Comments:

<sup>\*</sup>If they select that they are a college access professional, then they will be prompted to answer this question: How many individuals does your organization serve annually? Please provide an estimate. [Only numeric value will be accepted]\*

4. Name at least one aspect of the presentation that can be	e improved.
Comments:	
5. How will you use this information moving forward?	

6. Would you recommend this presentation to others?

Yes	No
0	0

Comments: