

Form Approved  
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## Questionnaire for Pulse Survey

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# Pulse Questionnaire

## Introduction

This questionnaire is for research purposes only and is not part of an investigation or audit by the Department of Labor. Your cooperation is voluntary. Your responses will not be linked with your company or with your name. Your responses to this questionnaire are private to the extent allowed by law and will not be shared with others outside of the study team. Any information that you provide with us today will be reported in the aggregate, meaning you, personally, will not be linked to the responses you provide.

[FOR ALL SAMPLED EVENT TYPES EXCEPT TRAININGS/WEBINARS]

1. Think about the issue or question that led you to contact [CENTER NAME] on [DATE]. Do you consider your issue or question to have been fully addressed, somewhat addressed, or not addressed at all?

- Fully addressed (*Continue to Q2*)
- Somewhat addressed (*Continue to Q2*)
- Not at all addressed (*Continue to Q1A*)
- I did not contact [CENTER NAME] with a question or concern on that date (*END SURVEY*)

1A. Which best explains why your issue or question has not been addressed?

- I have not yet heard from the [CENTER NAME]
- Staff at the [CENTER NAME] are looking into my issue and I am awaiting a resolution
- I received information from [CENTER NAME], but it did not address the issue
- I received information from [CENTER NAME], but I have not acted on it as yet
- Other  
reason\_\_\_\_\_

[END SURVEY with a thank you screen]

[FOR TRAINING/WEBINAR]

1. Did you attend a training or webinar held by [CENTER NAME] on [DATE]?

- Yes (*Continue to Q2*)
- No (*End Survey with a thank you screen*)

## Interactions with Center Staff

Please answer each of the following questions about your interactions with staff from [CENTER NAME] on [DATE].

**2. How would you rate the knowledge level of the staff?**

- Extremely knowledgeable
- Very knowledgeable
- Somewhat knowledgeable
- Not very knowledgeable
- Not at all knowledgeable

**3. How would you rate the professionalism shown by the staff?**

- Extremely professional
- Very professional
- Somewhat professional
- Not very professional
- Not at all professional

*[SKIP IF TRAINING OR WEBINAR]*

**4. How well did the staff understand your particular issue or question?**

- Completely understood my issue
- Mostly understood my issue
- Somewhat understood my issue
- Did not understand my issue

**5. Compared to what you expected, how much time did it take to address your issue or question?**

*[Skip if training or webinar]*

- Much less time than I expected
- A little less time than I expected
- About as much time as I expected
- A little more time than I expected
- Much more time than I expected
- My issue has not yet been addressed

**6. Was the training or webinar... *[For training or webinar only]***

- About the right length
- Too long
- Too short

## Assistance or Information You Received

**7. Considering the issue or question that led you to contact [CENTER NAME] on [DATE], how useful was the information you received?**

- Extremely useful
- Very useful
- Somewhat useful
- Not very useful
- Not at all useful

[For trainings/webinars]

**7a. How useful was the information you received?**

- Extremely useful
- Very useful
- Somewhat useful
- Not very useful
- Not at all useful

**8. How likely is it that you will use the information [CENTER NAME] provided?**

- Definitely will use it
- Very likely will use it
- Somewhat likely to use it
- Not very likely to use it
- Definitely won't use it
- Does not apply (e.g., I was getting information for someone else)

## Overall Satisfaction and Willingness to Recommend

**9. Overall, how satisfied are you with the experience you had with [CENTER NAME] on [DATE]?**

- Extremely satisfied
- Very Satisfied
- Satisfied
- Not very satisfied
- Not at all satisfied

**9a. Overall, how satisfied are you with the training or webinar you attended with [CENTER NAME] on [DATE]?**

- Extremely satisfied
- Very Satisfied
- Satisfied
- Not very satisfied
- Not at all satisfied

[For training/webinar]

**9b. Would you attend another training or webinar given by [CENTER NAME]?**

- Definitely yes
- Probably yes
- Probably not
- Definitely no

**10. On a scale from 0-10, how likely are you to recommend [CENTER NAME] to a friend or colleague?**

N												Extremely likely
ot at all	Likely	0	1	2	3	4	5	6	7	8	9	10
		▼	▼	▼	▼	▼	▼	▼	▼	▼	▼	▼
		□	□	□	□	□	□	□	□	□	□	□

[For training/webinar]

**10a. On a scale from 0-10, how likely are you to recommend a training or webinar from [CENTER NAME] to a friend or colleague?**

N												Extremely likely
ot at all	Likely	0	1	2	3	4	5	6	7	8	9	10
		▼	▼	▼	▼	▼	▼	▼	▼	▼	▼	▼

