NCI/Office of Communications and Public Liaison

## **APPENDIX 9**

**Customer Satisfaction Survey** 

## OMB NO: 0925-0208 EXPIRATION DATE: 04/30/2019

Collection of this information is authorized by the Public Health Service Act, Section 411 (42 USC 285a). Rights of study participants are protected by the Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. Refusal to participate will not affect your benefits in any way. The information collected in this study will be kept private, under the Privacy Act. Names and other identifiers will not appear in any report of this study. Information provided will be combined for all study participants and reported as summaries. You are being contacted by email to complete this instrument so that we can assess client satisfaction with services provided by the National Cancer Institute's Cancer Information Service.

Public reporting burden for this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0046-17). Do not return the completed form to this address.

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Thank you for contacting the National Cancer Institute. The following questions help us assess how satisfied you were with the service you received. Your responses are anonymous. Thank you in advance for answering these questions so that we may better serve the public.

Using a scale from 1-10, where 1 means Extremely Dissatisfied and 10 means Extremely Satisfied, how satisfied are you with the assistance you received?

Using a scale from 1-10, where 1 means Extremely Unlikely and 10 means Extremely Likely, how likely are you to contact our service again in the future?

Are there any comments you would like to leave about the service you received?

Submit
English Phones:
https://livehelp.cancer.gov/ci/documents/detail/5/10/12/5d10149b08f9281165f65760271ae91ffa6
<u>27625</u>
Spanish Phones:
https://livehelp.cancer.gov/ci/documents/detail/5/12/12/08f3b330913c1277dfc1885abd899143cd
<u>02bfff</u>
English Email:
https://livehelp.cancer.gov/ci/documents/detail/5/8/12/45ca9f62c58ab15b9fe123a36b3a420c68ec
<u>cd66</u>
Spanish Email:
https://livehelp.cancer.gov/ci/documents/detail/5/11/12/245cfe1718889dd43ee26d6654e354af83
<u>31c668</u>
English LH:
https://livehelp.cancer.gov/ci/documents/detail/5/9/12/99f9b0c9af441a03b923f1e3fdd02d88cc0c
<u>3a92</u>
Spanish LH:
https://livehelp.cancer.gov/ci/documents/detail/5/15/12/46a3781bc6dfdc82f309c8bc39687b788c
<u>a573b1</u>
VA Phones:
https://livehelp.cancer.gov/ci/documents/detail/5/16/12/cd491660ec409154660288733c9e7e9b36
4c1a63
VA LH:
https://livehelp.cancer.gov/ci/documents/detail/5/17/12/c2b1a2d2b4d242261ce77edecc37034fb7
b99485