**PFAS Exposure Assessment Community Event Evaluation Survey**

ATSDR estimates the average public reporting burden for this collection of information as 5 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0923-xxxx).

Form Approved

OMB No. 0923-xxxx

Exp. Date xx/xx/201x

Thank you for attending this event. We would appreciate your feedback.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
| Information Provided |  |  |  |  |  |
| 1. The information presented today was clear and easy to understand.
 |  |  |  |  |  |
| 1. The materials were helpful and contained useful information used (for example, presentation slides, brochures, videos, etc.).
 |  |  |  |  |  |
| 1. I understand what is happening in my community regarding the PFAS Exposure Assessment.
 |  |  |  |  |  |
| 1. Based on what I learned today, it is clear to me that my family and I should avoid drinking water with PFAS over the EPA’s Lifetime Health Advisory (LTHA).
 |  |  |  |  |  |
| 1. I understand what my family and I can do to avoid coming in contact with PFAS in our community.
 |  |  |  |  |  |
| 1. I understand who to get in touch with if I have a question about the Exposure Assessment project.
 |  |  |  |  |  |
| 1. I understand what ATSDR will do next in my community for the Exposure Assessment.
 |  |  |  |  |  |
| Presenter |  |  |  |  |  |
| 1. The presenter spoke in a way that was clear and easy to understand.
 |  |  |  |  |  |
| 1. The presenter interacted well with the audience.
 |  |  |  |  |  |
| 1. The presenter seemed well-informed about my community.
 |  |  |  |  |  |
| Logistics |  |  |  |  |  |
| 1. This event was held at a time that was convenient for me.
 |  |  |  |  |  |
| 1. This event was held at a location that was convenient for me.
 |  |  |  |  |  |

Please continue on the back.

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1. How did you hear about this event? Please check all that apply:

□ Letter □ Email □ Flier □ Facebook/Twitter □ Friend or family member

□ ATSDR website □TV □ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_

1. Was there any information you expected to receive at this event but did not get? Y / N Please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you understand how individuals are selected for potential participation in the Exposure Assessment? Y / N
3. Anything else you want to share? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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