



## Office of Chemical Security Voluntary Service Feedback Questionnaire

PROVIDING ANY INFORMATION FOR THIS QUESTIONNAIRE IS OPTIONAL.

Instructions: This is a short series of questions designed to elicit feedback that the Cybersecurity and Infrastructure Security Agency (CISA) Chemical Security program office can use to improve its services. The questionnaire results will not identify specific feedback by any individual or company; however, please note that you have the option to provide your name and email address for more information, or if you would like CISA to contact you about your feedback. Please contact us at [chemical.security@cisa.dhs.gov](mailto:chemical.security@cisa.dhs.gov) if you have any questions.

Paperwork Reduction Act Notice: The public reporting burden to complete this information collection is estimated at three (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 the Office of Chemical Security at [chemical.security@cisa.dhs.gov](mailto:chemical.security@cisa.dhs.gov) and include ATTN: PRA [1670-0027].

Privacy Notice:

**Authority:** The Cybersecurity and Infrastructure Security Act of 2018, 6 U.S.C. §§ 651-74 authorizes the collection of this information.

**Purpose:** This collection will be used to contact you so CISA may respond to your question(s).

**Routine Use:** The Personally Identifiable Information (PII) you provide will be used by and disclosed to DHS personnel, contractors, or other agents to contact you.

**Disclosure:** Providing this information is voluntary. However, failure to provide any of the information requested may result in CISA being unable to contact you.

1 Event Title:

Date of the CISA-provided voluntary service/activity (MM/DD/YYYY)?

Date

MM/DD/YYYY	
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2 Please select the category that best describes your organization:

- Academia & Research Centers
- Environmental Group
- Government – Federal
- Government – State
- Government – Local
- Government – Territorial
- Government – Tribal
- Industry Association – National
- Industry Association – State
- Industry – Corporate HQ
- Industry – Facility
- Labor Organization

Other (please specify industry)

3 Please evaluate the following statement: "The information received through this <service/event> was current and relevant."

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<service/event>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4 Please provide any recommendations that you may have on how future <service/event> could be improved to enhance their relevance. (Please do not include any information about your organization or any personally identifiable information about yourself or others in this response.)

5 Please evaluate the following statement: "The information received through this <service/event> will effectively inform my decision-making regarding safety and/or security, risk mitigation, and resilience enhancements."

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<service/event>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 6 Please provide any recommendations that you may have on how future <service/event> could be improved to increase their value in support of your mission. (Please do not include any information about your organization or any personally identifiable information about yourself or others in this response.)

- 7 Please evaluate the following statement: "I will encourage my organization to incorporate information I learned through this <service/event>."

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<service/event>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 8 Please provide any recommendations that you may have on how future <service/event> could be improved so that they can be better incorporated into security and/or resilience practices across the infrastructure or cyber security community. (Please do not include any information about your organization or any personally identifiable information about yourself or others in this response.)

- 9 If you would like more information, or if you would like CISA to contact you about this feedback, provide your name and email address below.

Name	<input type="text"/>
Email Address	<input type="text"/>