

OMB Control No: 0910-0360  
Expiration Date: 10/31/2023

## Survey Invitation Message

You recently took part in <enter **Course ID/Course Title**> and your assistance is requested to complete an evaluation regarding your satisfaction with the training. Please take the time to provide your feedback, as it is critical to making course improvements.

The evaluation should take ***only 5-7 minutes to complete*** and will be available for <enter duration>, closing on <enter closing date **Day, Month, Year.**>.

### ACCESSING THE EVALUATION:

- Click the following link (or paste it into your web address bar): **<INSERT LINK HERE>**

Please remember to click “Submit” when finished, otherwise your responses may not be saved.

### HOW YOUR DATA IS PROTECTED:

- No personal information is requested (e.g., name, birth date), collected, or associated with results.
- Participant information will be kept secure to the extent permitted by law.

**QUESTIONS:** If you have questions or need additional assistance in completing the evaluation, please contact <enter **First Name Last Name**> at <enter **phone number**> or <enter **email**>.