Appendix C-2 Large Organization Survey Consent Form

OMB Approval No: Expiration Date:

Consent Form

The U.S. Small Business Administration (SBA), via the Regional Innovation Clusters (RIC) Initiative, is investing in regional clusters throughout the United States. The [cluster name] ([cluster acronym]) is an implementer of the RIC Initiative. The [cluster name] is [brief description of the cluster's mission and industry].

The SBA has hired a small business research organization, Optimal Solutions Group, LLC (Optimal), to conduct an evaluation of the RIC Initiative. The objective of this evaluation is to determine if the RIC Initiative is meeting its intended outcomes. The results are expected to provide suggestions for improvements to the SBA initiative. To assist in this process, we request that you complete the following brief survey.

Based on event sign-up lists or attendance sheets, [Cluster POC name] stated that you attended or participated in cluster-organized trainings, events (including networking events), activities, and/or services. The purpose of this survey is to learn about your experiences with these events and/or services. Even if you are unsure, unaware, or don't recall your attendance in these events or services, we still would like to ask you a few questions that may help [cluster name] or organizations with similar functions tailor their message and outreach to organizations like yours.

Optimal Solutions Group LLC will collect and store your responses to this survey on a secure server accessible to Optimal Solutions Group staff only. Any information provided in this survey will be kept confidential. No respondent will be identified or named in any publicly available report or other such publication. All survey responses will be presented as aggregated statistics in the form of averages, percentages, and frequency counts. All survey responses will be de-identified and then these data will be provided to the SBA.

The survey is expected to take less than 20 minutes to complete. Your participation in this survey is completely voluntary. You do not have to answer any questions that you do not want to, and you can stop participating at any time. Your time and cooperation are greatly appreciated.

- If you have questions about the program, please contact [cluster point of contact] at [cluster POC email].
- If you have questions about your participation in this study, please contact Oswaldo Urdapilleta at Optimal, (301) 306-1170 Ext. 709, <u>ourdapilleta@optimalsolutionsgroup.com</u>
- If you have any questions or experience technical difficulties accessing or submitting the survey, please contact us at clusters@optimalsolutionsgroup.com or toll free at 1-800-970-2487.

I hereby agree that I have read and understand all of the information presented in this consent form. By checking "Yes", I freely and voluntarily agree to participate in this survey.

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- o Yes
- o No