

BIFAD Product Feedback Form

OMB: XXXX-XXXX

Expiration Date: XX/XX/XX

Thank you for viewing the [ENTER NAME OF PRODUCT]. Your feedback is invaluable and will help inform and improve future BIFAD-supported resources. Please respond to the following questions regarding this resource.

BIFAD is committed to increasing diversity, equity, inclusion, and access in the board's engagement and in global development more generally. This effort can be enhanced with reliable information about our stakeholders. If you choose to respond to all or some of the questions, information will remain confidential, with individual information not reported beyond the project team.

Paperwork Reduction Act Statement:

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Fields with (*) denotes a required field.

Required

Other

1 Do you intend to use any of the information or resources shared at this event/in this resource in your current work? * Yes 2 If you answered "Yes" in Question 2, how do you plan to use information from the event in your current work? Select all that may be relevant and feel free to explain further below: To inform the development of policy In the implementation of programs In designing new programs and activities In advising cooperating government partners In my research In my teaching

3
What is your current gender identity? *
○ Woman/girl
Man/boy
Additional gender identity
Prefer not to answer
4
May we contact you in the future to learn more about your work and if the resources shared were indeed useful? If you consent to be contacted, please share your professional email address here:

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Organization Type (select most relevant response below) *

\bigcirc	Prefer not to answer
\bigcirc	U.S. university
\bigcirc	University outside the U.S.
\bigcirc	U.S. Agency for International Development
\bigcirc	Other U.S. Government
\bigcirc	Non-U.S. Donor Organization
\bigcirc	Non-Profit Organization
\bigcirc	Firm
\bigcirc	Independent Consultant
\bigcirc	Publicly Traded Organization
	Other

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For faculty, staff, and students of U.S universities only, is your university identified as any of the following Minority Serving Institution (MSI) types? *

\bigcirc	Alaska Native-Serving Institution (ANSI)	
\bigcirc	Asian American Native American Pacific Islander-Serving Institution (AANAPISI)	
\bigcirc	Historically Black College or University (HBCU)	
\bigcirc	Hispanic-Serving Institution (HSIs)	
\bigcirc	Native American-Serving Non-Tribal Institution (NASNTI)	
\bigcirc	Native Hawaiian-Serving Institution (NHSI)	
\bigcirc	Predominantly Black Institution (PBI)	
\bigcirc	Tribal College or University (TCU)	
\bigcirc	No	
\bigcirc	I don't know	
7		
W	/hat is your age group?	
\bigcirc	Prefer not to answer	
\bigcirc	18-24 years old	
\bigcirc	25-29 years old	
\bigcirc	30 years or older	

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Please share any other comments, questions, or recommendations for action that you would like raised with BIFAD. Thank you for your feedback.

Thank you for your interest in BIFAD's work!





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