



# BIFAD Product Feedback Form

OMB: 0412-0623

Expiration Date: 05/31/2026

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:

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 0412-0623. Public reporting for this collection of information is estimated to be approximately one minute per response.

Fields with (\*) denotes a required field.

\* Required

1

Do you intend to use any of the information or resources shared at this event/in this resource in your current work? \*

Yes

No

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

Other

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:

Organization Type (select most relevant response below) \*

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

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

- Alaska Native-Serving Institution (ANSI)
- Asian American Native American Pacific Islander-Serving Institution (AANAPISI)
- Historically Black College or University (HBCU)
- Hispanic-Serving Institution (HSIs)
- Native American-Serving Non-Tribal Institution (NASNTI)
- Native Hawaiian-Serving Institution (NHSI)
- Predominantly Black Institution (PBI)
- Tribal College or University (TCU)
- No
- I don't know

7

What is your age group?

- Prefer not to answer
- 18-24 years old
- 25-29 years old
- 30 years or older

8

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!



---

This content is neither created nor endorsed by Microsoft. The data you submit will be sent to the form owner.

 Microsoft Forms