

# Return to Work Poll

## Survey Disclosure Statement

OMB Control Number: 0925-0648

Expiration Date: June 30, 2024

Public reporting burden for this collection of information is estimated to average 1 minute per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0648). Do not return the completed form to this address.

Last Reviewed: July 1, 2021

Q1 Have you returned to the physical work space?

Yes (1)

No (2)

Q2 In your opinion, which of the following are "must haves" for returning to work? (Please choose all that apply.)

Water bottle (1)

Snacks (2)

Coffee or tea (3)

Office decor (4)

Other (please specify) (5)

*Display This Question:*

*If Have you returned to the physical work space? = Yes*

Q3 When did you join the NLM staff?

- Before the COVID-19 pandemic (in other words, prior to March 13, 2020) (1)
- During the COVID-19 pandemic (in other words, after March 13, 2020) (2)

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*Display This Question:*

*If Have you returned to the physical work space? = Yes*

Q4 How long did it take before you found your building/office?

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*Display This Question:*

*If Have you returned to the physical work space? = Yes*

Q5 What is the first place that a new employee should visit?

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*Display This Question:*

*If Have you returned to the physical work space? = Yes*

Q6 What was the biggest surprise on your first day in the office?

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