OMB Control Number: 0970-0401
Expiration Date: June 30, 2024

CWRP Help Desk Survey

[Username]:

Your support ticket [###] has been resolved. Can you let us know how we did? Please take 1 minute to answer the questions below.

1. How satisfied are you with the support provided by the CWRP Help Desk? (Select One)

    a. Good, I'm satisfied [thumbs up icon will show]
    b. Bad, I'm unsatisfied [thumbs down icon will show]

    [If option a is chosen, user will skip to question 3]

2. What is the main reason you are unsatisfied?
    a. The issue took too long to resolve.
    b. The issue was not resolved.
    c. The Help Desk staff's attitude was unsatisfactory.
    d. The Help Desk staff's knowledge was unsatisfactory.
    e. Other: [text field provided for open-ended response]

3. Please provide additional comments about your experience with the Help Desk.

We appreciate your feedback to continually improve our customer service.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Information collection activity is a customer satisfaction survey. The purpose of this information collection is to monitor and improve customer satisfaction. Public reporting burden for this collection of information is estimated to average 1 minute per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. Agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0401 and the expiration date is 06/30/2024. If you have any comments on this collection of information, please contact Danielle McConaga at danielle.mcconaga@acf.hhs.gov.