

# HRSA OMB Approved Survey Questions

Q1 Was this page helpful?

Yes (1)

No (0)

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Q2 Browser Meta Info

Browser (1)

Version (2)

Operating System (3)

Screen Resolution (4)

Flash Version (5)

Java Support (6)

User Agent (7)

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*Display This Question:*

*If Was this page helpful? = No*

Q3 I did not find this page helpful because (check all that apply):

It had too little information (1)

It had too much information (2)

It was confusing or hard to understand (3)

It was out of date (4)

It didn't have the information I was looking for (5)

Other (please specify): (6) \_\_\_\_\_

Q10 How did you find this page?

- Internet search (1)
  - HRSA.gov search (2)
  - Social Media (3)
  - I subscribe to an email list that linked to this page (4)
  - Someone sent me a link (5)
  - I've bookmarked this page (6)
  - Browsing the site (7)
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Q11 How difficult or easy was it for you to find this page?

- Extremely easy (1)
  - Somewhat easy (2)
  - Neither easy nor difficult (3)
  - Somewhat difficult (4)
  - Extremely difficult (5)
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Page Break

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Q5 With which of the following groups do you most strongly identify?

- Academic or Researcher (1)
  - Family Caregiver (2)
  - Health Care Administrator (3)
  - Health Care Practitioner (4)
  - Media/Journalist (5)
  - Policymaker (6)
  - Public Health Professional (7)
  - Student (9)
  - Other (please specify): (8) \_\_\_\_\_
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Q4 Are you a current or potential HRSA grantee?

- I'm a current HRSA grantee (1)
  - I'm not currently a grantee, but I'm looking for/applying for a HRSA grant (2)
  - I'm neither of those (3)
- 

*Display This Question:*

*If Are you a current or potential HRSA grantee? = I'm a current HRSA grantee*

Q7 Where is your grant from?

- Bureau of Health Workforce (1)
  - Bureau of Primary Health Care (2)
  - Federal Office of Rural Health Policy (3)
  - Healthcare Systems Bureau (4)
  - HIV/AIDS Bureau (5)
  - Maternal & Child Health Bureau (6)
  - Office of the Administrator (7)
  - I'm not sure (8)
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Q8 Did you find what you were looking for today?

- Yes (1)
  - Partially (2)
  - No (3)
  - Not sure yet/still looking (4)
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*Display This Question:*

*If Did you find what you were looking for today? != Yes*

Q9 What information or topic were you looking for?

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Q6 How can we improve this page?

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End of Block: Default Question Block

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**Public Burden Statement:** The purpose of this collection is to measure the customer satisfaction of HRSA's websites. It will help HRSA establish benchmarks and identify & prioritize areas of improvement & enhancement to the websites, with the goal of improving the experience for visitors. 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. The OMB control number for this information collection is 0915-0212, and it is valid until 4/20/2024. This information collection is voluntary. Public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Information Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).