



Resource Center Customer Experience Survey

Which Resource Center did you visit today?

California Denver Espanola Hanford Idaho Las Vegas
 New York Oak Ridge Paducah Portsmouth Savannah River

Please indicate the reason for your visit today.

Filing a claim Completing an Occupational History Questionnaire interview
 Status of your claim Submitting documents Medical bill payment assistance
 General program information Other: _____

Please indicate your answers to the statements below by circling a response.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A
I am satisfied with the service I received at the Resource Center today.	5	4	3	2	1	n/a
This interaction increased my trust in DEEOIC.	5	4	3	2	1	n/a
My need was addressed at the Resource Center today.	5	4	3	2	1	n/a
It was easy to complete what I needed to do at the Resource Center today.	5	4	3	2	1	n/a
My Resource Center visit took a reasonable amount of time.	5	4	3	2	1	n/a
I was treated fairly today.	5	4	3	2	1	n/a
Employees I interacted with today were helpful.	5	4	3	2	1	n/a
If your questions/issues were not resolved, did the employee provide a date when you could expect a follow-up contact?	yes	no	n/a			

Additional feedback (please continue on the back of this form if necessary):

The OMB control number for this collection is 1225-0093 and expires on 02/29/2024. According to the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless such collection displays a valid OMB control number. The obligation to respond to this collection is voluntary. We estimate it takes about 5 minutes to complete this collection of information, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing the collection of information. Please send comments regarding the burden estimate or any other aspect of this collection of information to the U.S. Department of Labor, DEEOIC, 200 Constitution Ave., NW, Room C-3321, Washington, D.C. 20210 and reference OMB Control Number 1225-0093.

Note: Please do not return the completed form to this address.