Resource Center Customer Experience Survey

Which Resource Center did you visit today?								
California	DenverEspanola		Hanford		ldahol		Las Vegas	
New York	YorkOak RidgePaducah		PortsmouthSavanna		Savannah	River		
Please indicate the reason for your visit today.								
Filing a claim		Completi	ng an Occupational History Questionnaire interview					
Status of your claimSubmittin			ng documentsMedical bill payment assistance				ance	
General program informationOther:								
Please indicate y statements belov	our answers to to w by circling a res	he sponse.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A
Based on my exper I trust DEEOIC to fu to nuclear workers	ulfill our country's and their families	commitment	5	4	3	2	1	N/A
What factors contributed to your trust rating? (You may select more than one)								
• • • • • • • • • • • • • • • • • • • •			, , ,			☐ Ease of visit☐ Fairness during visit		
l am satisfied with Resource Center to		ved at the	5	4	3	2	1	N/A
My need was addr today.	essed at the Resou	ırce Center	5	4	3	2	1	N/A
It was easy to com the Resource Cent		ed to do at	5	4	3	2	1	N/A
My Resource Center visit took a reasonable amount of time.			5	4	3	2	1	N/A
l was treated fairly	today.		5	4	3	2	1	N/A
Employees I intera	cted with today we	ere helpful.	5	4	3	2	1	N/A
Additional feedb	oack (please cont	inue on the	back of this fo	orm if nece	ssary):			

The OMB control number for this collection is 1225-0093 and expires on 01/31/2027. 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-3510, Washington, D.C. 20210 and reference OMB Control Number 1225-0093.

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