

Introduction & Session Attended

Thank you for participating in the Matchmaking Event hosted by the GSA Office of Small and Disadvantaged Business Utilization. Please complete this short survey regarding the session.

Your feedback will help us enhance future events and identify ways to improve.

1. Please select the matchmaking event you attended. (Response required)

- ☐ Matchmaking with Small Businesses
- ☐ Matchmaking with Historically Underutilized Business Zone (HUBZone) Small Businesses
- ☐ Matchmaking with Service-disabled Veteran-owned Small Businesses (SDVOSB)
- ☐ Matchmaking with Small Disadvantaged Businesses (SDB)
- ☐ Matchmaking with Women-owned Small Businesses (WOSB)

2. Please provide the matchmaking event date (MM/DD/YYYY). (Response required)

Attendee Type

3. Please select your attendee type. Select all that apply. (Response required)

- | | |
|--|--|
| <input type="checkbox"/> Small Business | <input type="checkbox"/> Historically Black College and University |
| <input type="checkbox"/> Small Disadvantaged Business
(includes firms in the 8(a) Business Development Program) | <input type="checkbox"/> Minority-Serving Institution |
| <input type="checkbox"/> Women-Owned Small Business | <input type="checkbox"/> College/Underserved Community Partnership Program |
| <input type="checkbox"/> Economically Disadvantaged Women-Owned Small Business | <input type="checkbox"/> Federal Government Representative |
| <input type="checkbox"/> Veteran-Owned Small Business | <input type="checkbox"/> State Government Representative |
| <input type="checkbox"/> Service-Disabled Veteran-Owned Small Business | <input type="checkbox"/> Local Government Representative |
| <input type="checkbox"/> Historically Underutilized Business Zone Small Business | <input type="checkbox"/> Other
<input type="text"/> |
| <input type="checkbox"/> Other than Small Business | |

3a. Please select the agency, component, and sub-component you represent.
(Response required)

Agency

Component

Sub-Component

Survey Questions

4. How did you hear about this matchmaking event? Select all that apply.

- ☐ Social Media (e.g., X, Instagram, LinkedIn)
- ☐ GSA Interact
- ☐ GSA.gov

- ☐ Email
- ☐ GSA Representative
- ☐ Other

5. Please rate your level of satisfaction with the following items.

	Very Dissatisfied	Dissatisfied	Neither Dissatisfied or Satisfied	Satisfied	Very Satisfied	Not Applicable
Matchmaking session registration process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Matchmaking sessions with buyers (prime contractors or Federal Agency representatives)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Matchmaking sessions with sellers (small businesses)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of matchmaking sessions available	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Duration of matchmaking sessions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5a. Please explain the reason for your dissatisfaction.

6. Who do you plan to follow up with from this event? Select all that apply.

- ☐ Prime contractor
- ☐ Federal Agency representative
- ☐ Small business
- ☐ I do not plan to follow up
- ☐ Other

7. What did you find most valuable about the matchmaking sessions?

8. Please provide any additional feedback you may have about the matchmaking event.

Submit Survey

Thank you for completing the survey. Click the button below to submit.

Agency Information

[Privacy Act Statement](#)

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