## Comment Form



## NAME OF PROJECT AND CN NUMBER HERE

We want to hear from you and ask that yo team before [date of deadline]. ELECTRO		
your participation!		
Providing your contact information below the mailing/email list to receive future pr	• •	r, it will allow us to add you to
Name:		
Address:		
	Ctata	7in:
City: Email:	State: Phone:	Zip:
Ellidii.	Priorie.	
Share your comments and questions by n		
Name, Position  Attn: Project Name, CN Number	Email: <mark>emailaddr</mark> Phone: <mark>505-231-7</mark>	
Street Address, City, NM, Zip Code	Webpage: websit	
The questions below are intended to help what improvements to consider implement		
advance for taking the time to fill out the s	urvey. <b>We value your</b>	input!
How did you hear about this public meeti	i <b>ng?</b> (please check)	
☐ Newspaper ☐ Signs ☐ DOT website	☐ Radio ☐ Social M	ledia 🚨 Word of Mouth
☐ Postcard/Mailer ☐ Other:		
Was the information easy to understand	and informative? $oldsymbol{\Box}$ ${}^{\backprime}$	∕es □ No
Please specify:		



Please indicate which of the following best represents you:
☐ Local Resident ☐ Local Business/Industry/Trade Association ☐ Neighborhood Group
☐ Local Non-Profit Organization ☐ National Environmental Organization
☐ Local or State Government ☐ Federal or Tribal Government
Other (please specify)
Thank you for taking a few minutes to complete this survey. <b>Answering the following questions is optional</b> but your response will be extremely helpful in ensuring the fairness and equity of NMDOT's public involvement process. Submissions will be kept confidential and separate from any personally identifiable information so that respondents will remain anonymous. These questions are not listed in any particular order.
What is your race?
$\square$ Black or African American $\square$ American Indian or Alaskan Native $\square$ Asian
$lacksquare$ Hispanic or Latino $\lacksquare$ White $\lacksquare$ Native Hawaiian or Other Pacific Islander
☐ I prefer to self-describe:
What is the primary language spoken in your home?
☐ English ☐ Spanish ☐ Other (Please specify):
Was project information translated into other languages appropriately?
☐ Yes ☐ No ☐ Not Applicable
How many people live in your household?
□ 1-2 □ 3-5 □ 6+
What are the age ranges of those living in your household? (Check all that apply.)
☐ Under 18 ☐ 19 – 44 ☐ 45 – 64 ☐ 65 +
What is your annual household income?
☐ Less than \$10,000 ☐ \$10,000 - \$24,999 ☐ \$25,000 - \$49,999 ☐ \$50,000 - \$74,999
□ \$75,000 - \$99,999 □ \$100,000 - \$149,999 □ \$150,000 +
What is the highest level of education completed by members of your household?
lacksquare None $lacksquare$ Elementary School $lacksquare$ Middle School $lacksquare$ High School $lacksquare$ College/University
Other:
Do any individuals living in your home have a physical or mental impairment that substantially limits one or more major life activities?



	e suggest additional ways you think NMDOT can improve the inclusiveness of our public ach efforts!
Pleas	e submit this comment form to a member of our team or return it by mail or email.
Email	(preferred): <a href="mailto:Jennifer.mullins@state.nm.us">Jennifer.mullins@state.nm.us</a> or <a href="mailto:consultantemail.com">consultant@consultantemail.com</a>
Mail:	NMDOT Environmental Bureau, c/o Jennifer Mullins
	1120 Cerrillos Road, Room 206
	Santa Fe, NM 87505
	OR
	Consultant Company/Name
	1232 Road
	City, NM 87505

## THANK YOU FOR HELPING NMDOT IMPROVE ITS PUBLIC INVOLVEMENT PRACTICES!