

Opt In Notice – SAMPLE

COVID-19 Business Impact Survey Snapshot

Thank you for taking a few minutes today to complete this important survey.

Please review your rights as a participant before accessing the survey.

- The purpose of this survey is to better understand the impact of the Coronavirus (COVID-19) on _____ businesses and organizations.
 - We estimate the survey will take about _____ minutes to complete.
 - Businesses or organizations with multiple locations or branches can complete one survey per location.
 - Survey deadline is _____.
 - Your participation in this research is 100% voluntary and confidential.
 - There will be no compensation for your time, and there are no direct benefits to you, but we believe the information will aid state and local officials in crafting more targeted assistance to businesses and organizations affected by the coronavirus (COVID-19).
 - You may choose to discontinue participation at any time.
 - While no entity can guarantee that data transmitted over the Internet is 100% secure, please be assured the _____ org _____ is committed to protecting your privacy and confidentiality.
 - If you have any questions related to this survey, contact _____ at _____.
- I understand and agree to my rights as a participant and I wish to proceed.
- I wish to discontinue the survey.