

Thank you for completing the Program Impact Report for your EMAS application. Your responses to the following section will further help us evaluate the effectiveness of the program you participated in. We look forward to receiving your feedback.

a. Please highlight your experience:
b. Pros / cons of the experience:
c. What did you hope to achieve? Was it achieved?
d. Would you recommend our program to other businesses / associates?
e. What recommendations do you have to improve the overall program?

A follow-up impact report is required to be submitted within 12 months.

I hereby certify that all the information provided in this document, as well as any accompanying documents, are true and complete.	
Signature of Authorized Company Official	Date:
Print Name:	Print Title:

Email the completed EMAS Impact Report to globalny@esd.ny.gov