

Employers Economic Impact Survey (EEIS)
When Guard or Reserve Employees Are Absent From Work to Serve in the Military
Section One: Human Resources Impact

A Department of Defense Research Study



Conducted by:



1-800-601-7434

Required Agency Disclosure Statement: The public reporting burden for this collection of information is estimated to average 30 and 20 minutes per response for Sections One and Two, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Executive Services and Communications Directorate [OMB Control # 0704-0433]. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a current OMB Control Number.

The Department of Defense (DoD) is evaluating the impact of its policy on the civilian economy when Guard or Reserve employees are absent from work for more than 30 days to serve in the military. The DoD will use this information to better understand the vital role employers play in supporting our troops and our nation, as well as to identify possible ways in which the DoD may be able to better meet employers' needs. Survey results will be analyzed by the Institute for Defense Analyses (IDA) and *Camp & Associates, LLC (CALLC)*.

- o The *ideal respondent* for **Section One** is the person most knowledgeable about the impact and cost to your human resources when Guard/Reserve employees are absent from work (e.g., manager or supervisor of Guard/Reserve employees).
- o Section One may take approximately 30 minutes to complete.
- o This is your opportunity to tell the Department of Defense what is working, needs improvement, or should be changed.
- o Your participation is voluntary, but vital to the success of our research. If you choose to participate, you may answer all or only some of the questions.
- o Your organization's individual responses will not be associated with your organization's name, and your organization's name and street address will be kept confidential by the independent social science survey research firm.
- o The information you provide in response to this survey is protected under the provisions of the Freedom of Information Act (FOIA) Exemption 4: Trade Secrets, Commercial or Financial Information, and, when appropriate, the Privacy Act, except as otherwise required by law.
- o Your organization was selected at random from over 57,000 employers nationwide who employ or have employed Guard/Reserve members at any time since 2005.
- o Substituting another organization in your place may jeopardize the scientific methods used for the research.
- o Survey questions focus on your organization's experience with employing Guard/Reserve members, and on areas that may be impacting your organization's costs. The survey also collects demographic information about your organization for statistical purposes.

The Department of Defense needs your help, asks for your assistance, and thanks you in advance for your time and continued support. Your assistance will provide valuable information, that we would otherwise not know, about the impact on employers when Guard/Reserve members are absent for more than 30 days to serve in the military.

- o This research is sponsored by the Department of Defense, Office of the Assistant Secretary of Defense for Reserve Affairs.
- o *CALLC*, an independent social science survey research organization, is authorized to collect this information. *CALLC* is located at 6701 Democracy Blvd., Suite 300, Bethesda, MD 20817.
- o If you require assistance, *CALLC* research staff can be reached via electronic mail at DODsurvey@callcresearch.com or by calling toll-free at 1-800-601-7434.

Instructions for Completing the Survey

- o **Please note: The survey was designed for all employers. Therefore, a number of sections and/or questions may not apply to your organization. In these cases, survey instructions will direct you to the next question or section, as appropriate.**
- o Please read each question completely before you answer.
- o Please provide actual data whenever possible. If providing actual data is not possible, please provide your best estimate.
- o If additional space is needed to fully respond to any one question, please use the margin or back cover to record your response.
- o Instructions and section headings are *italicized*.
- o For response categories such as "Y N," please check the box to the left of the response category you choose.
- o For numeric response categories such as "How many? _____," please record your numeric response on the line provided to the right of the question.
- o For text response categories such as "Please specify: _____," please write your response in the box or line provided. If additional space is needed to completely answer a question, please use the margin or back cover.

- **DK** may be used for Don't Know.
- **RF** may be used for Refused.
- **E** should be used when reporting estimated figures.
- Survey questions flow from top to bottom on each page.

- o Section breaks and complex questions within response categories are separated by a shaded area.
- o Unless a response category is followed by a **Go To**, proceed to the next question.
- o To make corrections, please place a diagonal line through the incorrect response and write your new response next to it, e.g., ~~12~~ 14.
- o Once all of the questions are answered, please put the survey booklet(s) into the stamped, self-addressed return envelope(s), and deposit the envelope(s) in a United States Postal Service mailbox. No additional postage is required.
- o If you have any questions, or if we can assist you in any way, please do not hesitate to call 1-800-601-7434. We are here to help you help us!

Instruction 1: For this survey, please round down for less than one-half and round up for one-half or more. For example, if an employee was gone for 6 months and 8 days, you would record 6 months. If the employee was gone 6 months and 17 days, you would record 7 months. Please apply the same method of rounding to all questions that request numbers. When in doubt about rounding, please call 1-800-601-7434.

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1.0. Number of Guard or Reserve Employees

This section focuses on the number of Guard/Reserve members employed at this organization.

1.1. Including those on active duty, how many Guard/Reserve members were employed by this organization in 2006 and 2005?

	2006	2005	None in either year
A. Number of Guard/Reserve employed			<input type="checkbox"/> → Go To Instruction 2
B. Number of Guard/Reserve absent from work for more than 30 days to serve in the military			<input type="checkbox"/> → Go To Instruction 2
C. Of the number of Guard/Reserve reported in B, how many left work more than once in any one year to serve more than 30 days in the military?			<input type="checkbox"/> → Go To 2.0.

Instruction 2: *If no Guard/Reserve employees were absent from work for more than 30 days to serve in the military in 2006 or 2005, please Go To 14.0. on page 6.*

2.0. Continuation of Benefit Days While Serving in the Military

2.1. In 2006 or 2005, while Guard/Reserve employees were serving in the military for more than 30 days, did they continue to accrue any paid benefit days including vacation in any year?

Y → **Go To 2.1.a.**

Paid benefit days not offered in either year → **Go To 5.0.**

2.1.a. By year, which paid benefit days continued to accrue while serving in the military for more than 30 days? (Please check all that apply)

Category	Holidays	Sick	Personal	Vacation	Other days	Please describe
2006	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> →	
2005	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> →	

2.1.b. By year, while serving in the military, for how many **months** in one year could paid benefit days continue to accrue?

Category	Holidays	Sick	Personal	Vacation	Other days
2006	#	#	#	#	#
2005	#	#	#	#	#

2.1.c. By year, did benefit days continue to accrue until they returned?

Category	No to all	Yes to all	Go To		Yes to some	Please indicate which days did not continue to accrue.
2006	<input type="checkbox"/>	<input type="checkbox"/>	2005		<input type="checkbox"/> →	
2005	<input type="checkbox"/>	<input type="checkbox"/>	2.1.d.		<input type="checkbox"/> →	

2.1.d. In 2006 or 2005, did paid benefit days accrue at the same rate as before the employee left to serve in the military for more than 30 days? N Y → **Go To 3.0.**

2.1.e. By year, what was the new annual accrual rate?

Category	New accrual rate in 2006		New accrual rate in 2005	
	Days	Per:	Days	Per:
Vacation				
Holidays				
Sick days				
Personal days				
Other days				

3.0. Benefit Days – Other Than Vacation – Offered by the Employer to All Employees

To better understand the cost to employers when Guard/Reserve employees are absent from work serving in the military for more than 30 days, we first need to understand what benefits are offered by your organization, and then what it costs to offer these benefits.

3.1. Excluding vacation, in 2006 and 2005, what was the maximum number of paid benefit days that could be earned in each year?

Category	Holidays	Sick days	Personal days	Other days
2006	#	#	#	#
2005	#	#	#	#

3.2. In 2006 or 2005, could any unused benefit days be carried over to the next year?
 Y N → **Go To 4.0.**

3.3. In 2006 and 2005, which unused benefit days could be carried over into the next year, and how many days could be carried over? (**Please do not include vacation.**)

Category	Benefit days that could be carried over	Maximum number of days that could be carried over in 2006	Maximum number of days that could be carried over in 2005
Holidays	<input type="checkbox"/> N <input type="checkbox"/> Y →	#	#
Sick days	<input type="checkbox"/> N <input type="checkbox"/> Y →	#	#
Personal days	<input type="checkbox"/> N <input type="checkbox"/> Y →	#	#
Other days	<input type="checkbox"/> N <input type="checkbox"/> Y →	#	#

4.0. Vacation Offered by the Employer to All Employees

4.1. By year, how was vacation earned?

Year	Years of service	Number of hours worked	Vacation not offered
2006	<input type="checkbox"/> → Go To 2005	<input type="checkbox"/> → Go To 2005	<input type="checkbox"/> → Go To 2005
2005	<input type="checkbox"/> → Go To 4.2.	<input type="checkbox"/> → Go To 4.3.	<input type="checkbox"/> → Go To 5.0.

4.2. Starting with the first year of service, how many paid vacation days were earned for each of the following years of service?

Description	Number of vacation days for each year of service					Go To
	1 year more	2 years	3 years	4 years	5 or more	
Vacation days						4.4.

4.3. By year, how many hours did each employee need to work to earn one vacation day?

Description	Number of hours worked to earn one vacation day	
	2006	2005
Hours		

4.4. By year, what was the maximum number of vacation days that one person could earn in one year?

Year	Maximum vacation days in one year
2006	#
2005	#

5.0. Health Coverage

5.1. In 2006 or 2005, was health insurance offered? Y N →Go To 6.0.

5.2. In 2006 or 2005, did the employer make any contributions? Y N →Go To 6.0.

5.2.a. In 2006 or 2005, did employer contributions continue while Guard/Reserve employees were serving in the military for more than 30 days? Y N →Go To 6.0.

5.2.b. By year, how long did employer contributions continue and at what rate?

Year	Number of months →	Did employer contributions continue until they returned?		Was this contribution at the same rate it was before they left?		Please indicate the change either in dollars or by percent of gross salaries by recording the amount and then checking the appropriate box below.	
		Yes	No→	Yes	No	Increase	Decrease
2006		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> →Go To 2005	<input type="checkbox"/> →	<input type="checkbox"/> % <input type="checkbox"/> \$	<input type="checkbox"/> % <input type="checkbox"/> \$
2005		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> →Go To 6.0.	<input type="checkbox"/> →	<input type="checkbox"/> % <input type="checkbox"/> \$	<input type="checkbox"/> % <input type="checkbox"/> \$

6.0. Defined Benefits Retirement Plans

6.1. In 2006 or 2005, did this employer participate in any defined benefits retirement plan? Y N →Go To 7.0.

7.0.

6.1.a. In 2006 or 2005, did the employer make any contributions? Y N →Go To 7.0.

7.0. Retirement Contribution Accounts

7.1. In 2006 or 2005, did this employer make any matching, voluntary, or mandatory payments to retirement contribution accounts, e.g., 401(k), 403(b)? Y N →Go To 8.0.

7.1.a. By year, what was the maximum allowable **employer** contribution in each year?

Description	Not offered	2006	2005
Matching rate	<input type="checkbox"/>	%	%
Voluntary rate	<input type="checkbox"/>	%	%
Mandatory rate	<input type="checkbox"/>	%	%

7.1.b. By year, what was the maximum allowable **employee** contribution in each year?

Description	Not offered	2006	2005
Matching rate	<input type="checkbox"/>	%	%
Voluntary rate	<input type="checkbox"/>	%	%
Mandatory rate	<input type="checkbox"/>	%	%

8.0. Stock Benefits

8.1. In 2006 or 2005, was any portion of compensation awarded in **stock benefits**? Y N →Go

To 9.0.

8.2. In 2006 or 2005, while Guard/Reserve employees were serving in the military for more than 30 days, did they continue to accrue **stock benefits**? Y N →Go To 9.0.

8.2.a. By year, how were stock benefits awarded to employees?

Year	Percentage of gross pay	Lump Sum →	By year, what was the average amount or percentage awarded?	Did stock benefits accrue until Guard/Reserve returned?	
				Yes	No
2006	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
2005	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

9.0. Profit Sharing

9.1. In 2006 or 2005, was any portion of gross pay awarded in **profit sharing**? Y N →Go To 10.0.

9.2. In 2006 or 2005, while Guard/Reserve employees were serving in the military for more than 30 days, did they continue to accrue **profit sharing**? Y N →Go To 10.0.

9.2.a. On average, how was profit sharing awarded to employees?

Year	Percentage of gross pay	Lump Sum →	By year, what was the average amount or percentage awarded?	Did profit sharing accrue until Guard/Reserve returned?	
				Yes	No
2006	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
2005	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

10.0. Cost of Living or Years of Service Increases

10.1. In 2006 and 2005, what percentage of gross pay was awarded to all or most employees for cost of living or years of service increases?
Not offered in either year → Go To 11.0.

Year	Cost of Living		Years of Service	None	Go To
2006	%		%→ For each _____ year(s)	<input type="checkbox"/> →	2005
2005	%		%→ For each _____ year(s)	<input type="checkbox"/> →	11.0.

11.0. Compensation

11.1. In 2006 and 2005, when Guard/Reserve employees served in the military for more than 30 days, how were they compensated by this employer? *(Please respond for 2006 and then for 2005 before moving to the next section.)*

2006	2005	Description	2006 Go To	2005 Go To
<input type="checkbox"/>	<input type="checkbox"/>	They were paid the difference between their military pay and civilian pay.	11.1.a.	11.1.a.
<input type="checkbox"/>	<input type="checkbox"/>	Their pay stopped after 90 days.	12.0.	12.0.
<input type="checkbox"/>	<input type="checkbox"/>	Their pay stopped once they stopped working.	12.0.	12.0.
<input type="checkbox"/>	<input type="checkbox"/>	Other? Please explain:	11.1.a.	11.1.a.

11.1.a. How many months were they paid at this rate? (Use 0 for less than one month)

Year	Number of months	Was this until they returned?	Go To
2006		<input type="checkbox"/> Y <input type="checkbox"/> N	2005
2005		<input type="checkbox"/> Y <input type="checkbox"/> N	12.0.

12.0. Agency Fees and Additional Hiring Costs

12.1. In 2006 or 2005, were agencies used to hire any permanent or temporary replacements? Y N →Go To **13.0.**

12.1.a. By year, what was the average fee paid to an agency to hire one employee?

Description	2006	2005
Average agency fee paid	\$ _____	\$ _____

12.1.b. By year, how many permanent or temporary personnel were hired to replace Guard/ Reserve employees using an agency?

Year	Number hired using an agency	None	Go To
2006		<input type="checkbox"/>	2005
2005		<input type="checkbox"/>	12.2.

12.1.c. Were any of these agency fees refunded?

N →Go To **12.2.** Y →How much in 2006? \$ _____ →in 2005? \$ _____

12.2. In 2006 or 2005, were there any additional costs associated with hiring permanent or temporary replacement personnel to replace Guard/Reserve employees serving in the military for more than 30 days? Y N →Go To **13.0.**

Category	No Costs	2006 Amount →	Total or Per Occurrence	2005 Amount →	Total or Per Occurrence
Reference verifications	<input type="checkbox"/>	\$ _____	<input type="checkbox"/> T <input type="checkbox"/> PO	\$ _____	<input type="checkbox"/> T <input type="checkbox"/> PO

Application fees	<input type="checkbox"/>	\$	<input type="checkbox"/> T <input type="checkbox"/> PO	\$	<input type="checkbox"/> T <input type="checkbox"/> PO
Security clearance fees	<input type="checkbox"/>	\$	<input type="checkbox"/> T <input type="checkbox"/> PO	\$	<input type="checkbox"/> T <input type="checkbox"/> PO
Advertising costs	<input type="checkbox"/>	\$	<input type="checkbox"/> T <input type="checkbox"/> PO	\$	<input type="checkbox"/> T <input type="checkbox"/> PO
HR overtime	<input type="checkbox"/>	\$	<input type="checkbox"/> T <input type="checkbox"/> PO	\$	<input type="checkbox"/> T <input type="checkbox"/> PO
Other	<input type="checkbox"/>	\$	<input type="checkbox"/> T <input type="checkbox"/> PO	\$	<input type="checkbox"/> T <input type="checkbox"/> PO

13.0. Other Benefit(s) or Cost(s)

13.1. In 2006 or 2005, were there any other benefit(s) or cost(s) that we have not asked about? Y N →Go To 14.0.

13.1.a. Below, please describe the other cost(s) and include the year in which they were incurred.

Year	Description	Costs	Recovery time

14.0. Employer Characteristics

14.1. Is your organization: *(Please select only one.)*

- Private for-profit organization
- Private non-profit organization
- Federal government agency
- State, county, or local government organization →Go To 14.4.

14.2. Is your organization a: *(Please select only one.)*

- Sole Proprietorship/Self-Employed
- Partnership
- Limited Liability Company
- Limited Liability Corporation
- Corporation or S-Corporation
- Specify: _____

14.3. Is your organization: *(Please select all that apply.)*

- Small Business
- HubZone
- Small Disadvantaged Business
- Woman-Owned

- Veteran-Owned
 Minority-Owned

- Specify: _____
 None of the above

14.4. What year, or approximate year, was this business started or purchased?
 Year started: ___ ___ ___ ___ or Year purchased: ___ ___ ___ ___

14.5. In 2006 and 2005, including owners, how many people were employed by this organization? **(Please provide an estimate if the exact number is not known.)**

Year	Total full time employees in organization	Total part-time employees in organization		Total full time employees at this location	Total part-time employees at this location
2006					
2005					

14.6. In 2006 and 2005, what were the gross revenues for this organization?

Year	Less than \$300,000	\$300,001 to \$2 million	\$2,000,001 to \$6 million	\$6,000,001 to \$25 million	More than \$25 million	Go To
2006	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2005
2005	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14.7.

14.7. From the list below, please place a check mark next to your organization's primary industry. **(Please check only one.)**

<input checked="" type="checkbox"/>	Category		<input checked="" type="checkbox"/>	Category
	Agriculture, Forestry, Fishing, and Hunting			Professional, Scientific, and Technical Services
	Mining			Management of Companies and Enterprises
	Utilities			Administrative and Support of Waste Management and Remediation Services
	Construction			Educational Services
	Manufacturing			Health Care and Social Assistance
	Wholesale Trade			Arts, Entertainment, and Recreation
	Retail Trade			Accommodation and Food Services
	Transportation and Warehousing			Other Services (except Public Administration)
	Information			Public Administration
	Finance and Insurance			Government Agency → <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Local
	Real Estate, Rental, and Leasing			Other: Please specify _____

15.0. Comments

15.1. Please include below any additional comments you would like to share.

16.0. Human Resources Matrix (HRM) – Instructions for completing the HRM

*If 10 or fewer Guard/Reserve employees were absent in 2006 and 2005 → **Go To HRM** by folding this page out and listing all absent Guard/Reserves in 2006 and 2005.*

*If more than 10 Guard/Reserve employees were absent in 2006 and 2005 → **Go To Step A** below.*

Step A. Create a list of all Guard/Reserve employees absent in 2006 and/or 2005.

Step B. Arrange (or sort) the list in a random order using employee identification number or some other number.

Step C. Taking the total number of Guard/Reserve from the list created in Step B, divide by 10.

- Example: Number of Guard/Reserve listed in Step B = 18
- For Step C: $18 / 10 = 1.8$

Step D. If Step C is not a whole number, round up or down using the following rounding rules:

- o Round **up** if greater than one half (0.5), e.g., .6, .7, .8, and .9
- o Round **down** if one half or less, e.g., .1, .2, .3, .4, and .5

- Example: **1.8** would be rounded up to **2**

Step E. From the list created in Step B, select the Guard/Reserve employee that is in the position of the final number from Step D (in the example, it would be the employee listed second on the list), and list this employee on the first line of the Human Resources Matrix found on the following page.

Step F. To identify the next employee to include in the matrix, add the number from Step D to the starting point in Step E.

- Example: Starting position is 2 and Step D=2, therefore, 2+2=4.
- The next employee selected to list in the HRM is the fourth person listed on the list created in Step B.
- Repeat this process until you have reached the end of the Step B list.

Note: *No more than 10 Guard/Reserve employees will be selected to be included in the HRM. Also, please do not hesitate to call 1-800-601-7434 if you need assistance.*

Please fold this page out to view the HRM.

If you would like to receive a brief report of preliminary survey results being offered to all survey participants, please provide your mailing address below: Do not send report

Attn: _____ (optional)

Company: _____

Street Address: _____

City, State, and Zip: _____

Please note: Preliminary survey results will be mailed approximately eight weeks after the close of data collection.

Please return your completed survey using the enclosed self-addressed Business Reply Envelope, and deposit it with the United States Postal Service for delivery. Postage is paid by CALLC. No additional postage is required.

If you need assistance:

**Please call 1-800-601-7434, or
e-mail DODsurvey@callcresearch.com**

**Thank you for your time, for your assistance with this important research,
and for your continued support.**

Project Number:_____