

**Employers Economic Impact Survey (EEIS)**  
*When Guard or Reserve Employees Are Absent From Work to Serve in the Military*  
**Section Two: Operational 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/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 Two** is the person most knowledgeable about the operational impact and cost to your business when Guard/Reserve employees are absent from work (e.g., operations manager or supervisor of Guard/Reserve employees).
- o Section Two may take approximately 20 minutes to complete.
- o This is your opportunity to tell the Department of Defense what is working, what needs improvement, or what 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 or 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 or 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](mailto: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 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.***

**1.0. Organizational Impact**

*In this section, we are interested in your organization's employment experience with Guard/Reserve members.*

1.1. Using a scale from 1 (worse) to 5 (better), in general, how does the performance of Guard/Reserve employees compare to that of other employees at your organization in the following areas?

	Worse		Same		Better
a. Organizational Skills	①	②	③	④	⑤
b. Communication Skills	①	②	③	④	⑤
c. Management Skills	①	②	③	④	⑤
d. Technical Skills	①	②	③	④	⑤
e. Leadership Ability	①	②	③	④	⑤
f. Teamwork Skills	①	②	③	④	⑤
g. Dependability	①	②	③	④	⑤
h. Initiative	①	②	③	④	⑤

1.2. Overall, has your organization found that the benefits of employing *Guard/Reserve* members outweigh all other factors? Y N

1.3. Is your organization considered a first responder, e.g., police, fire and rescue? Y N

1.4. While Guard/Reserve employees served in the military for more than 30 days, were there any changes, either positive or negative, among remaining employees, as in morale, teamwork, or volunteerism? Y →Please explain below N →Go To 2.0.

**2.0. Notice**

*In this section, we are interested in understanding how well Guard/Reserve employees kept their employers informed concerning their absence from work to serve in the military.*

2.1. On average, how many days notice was given by *Guard/Reserve* employees before they stopped working to serve in the military for more than 30 days in 2006 and 2005?

Year	2006	2005
Days notice	Days	Days

2.2. **By year, was the amount of notice given sufficient? (Please read from left to right)**

Year	Yes	Go To	No	How many days notice would have been needed?	Go To
Year					
2006	<input type="checkbox"/> →	<b>2005</b>	<input type="checkbox"/> →		<b>2005</b>

2005	<input type="checkbox"/> →	2.3	<input type="checkbox"/> →		2.3
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2.3. By year, please briefly describe any positive or negative business impacts and/or changes made as a result of the notice you received in 2006 and 2005.

Year	No impact	Business impact and changes made as a result	Number of weeks (W) or months (M) impact lasted
2006	<input type="checkbox"/> → <b>Go To 2005</b>		# _____ Please circle one: W M
2005	<input type="checkbox"/> → <b>Go To 3.0.</b>		# _____ Please circle one: W M

### 3.0. Employee Training

3.1. Did your organization train employees to perform the duties of *Guard/ Reserve* members serving in the military for more than 30 days?  Y  N → **Go To 4.0.**

Year	Number of employees trained	Number of hours spent by trainer training	Average <u>trainer's</u> per hour rate	Number of hours spent by trainee being trained	Average <u>trainee's</u> per hour rate
2006					
2005					

### 4.0. Employee and Family Voluntary Support

*Next we would like to focus on voluntary support offered by your organization to your Guard/ Reserve employees and their families.*

4.1. In either 2006 or 2005, did your organization voluntarily spend money (e.g., laptops, phone cards, care packages) other than pay benefits to support your **Guard/Reserve employees** serving in the military for more than 30 days?  Y  N → **Go To 4.2.**

4.1.a. By year, please briefly describe the type(s) of voluntary support provided to your **Guard/ Reserve employees** and include an estimated dollar value for each.

Year	Description	Dollar Value
2006		\$
2005		\$

- 4.2. In either 2006 or 2005, did your organization voluntarily spend money (e.g., support groups, childcare, home repairs) to support the **families of your Guard/Reserve employees** serving in the military for more than 30 days?  Y  N **→Go To 5.0.**
- 4.2.a. By year, please briefly describe the type(s) of voluntary support provided to the **families of Guard/Reserve employees** and include an estimated dollar value for each.

Year	Description	Dollar Value
2006		\$
2005		\$

**5.0. Permanent Replacement Personnel**

*In this section, we would like to focus on permanent replacement personnel – **permanent replacement personnel are added to the payroll and accrue benefits, if offered** – hired by your organization.*

- 5.1. In 2006 or 2005, did your organization hire **any** permanent replacement personnel?  Y  N **→Go To 6.0.**

- 5.1.a. Were any permanent replacement personnel hired to replace Guard/Reserve employees serving in the military for more than 30 days?  Y  N **→Go To 6.0.**

- 5.2. On average, was the amount paid to permanent replacement personnel about the same, more, or less than the amount paid to the Guard/Reserve employees they replaced?  
 About the same **→Go To 5.4.**     More **→Go To 5.3.**     Less **→Go To 5.3.**

**5.3. Below, please tell us on average how much more or less was paid. (Please also tell us if this amount is for an hour, day, week, month, or year.)**

Year	More Than	Less Than	On average, how much more or less was paid?		Per: H=Hour W=Week M=Month Y=Year	How many month(s) was the higher or lower rate paid?
			→ More	Less		
2006	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	_____	
2005	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	_____	

- 5.4. In 2006 or 2005, were permanent replacements trained?  Y  N **→Go To 6.0.**

Year	Number that were trained	Number of hours spent by trainer to train	Trainer's cost per hour		Number of hours spent by trainee being trained	Trainee's cost per hour
2006	→	→	→		→	
2005	→	→	→		→	

### 6.0. Temporary Replacements

In this section, we would like to focus on temporary replacements – **temporary replacements do not accrue benefits and are paid by the hour for hours worked** – hired by your organization.

- 6.1. In 2006 or 2005, did your organization hire **any** temporary replacements?  Y  N →Go To 7.0.
- 6.1.a. Were any temporary replacements hired to replace Guard/Reserve employees serving in the military for more than 30 days?  Y  N →Go To 7.0.
- 6.2. On average, was the amount paid to temporary replacement personnel about the same, more, or less than the amount paid to the Guard/Reserve employees they replaced?  
 About the Same →Go To 6.4.  More →Go To 6.3.  Less →Go To 6.3.
- 6.3. **Below, please tell us how much more or less was paid. (Please also tell us if this amount is for an hour, day, week, month, or year.)**

Year	More than	Less than	On average, how much more or less was paid?		Per: H=Hour W=Week M=Month Y=Year	How many month(s) was the higher or lower rate paid?
			→ More	Less		
2006	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	_____	
2005	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	_____	

- 6.4. In 2006 or 2005, were temporary replacements trained?  Y  N →Go To 7.0.

Year	Number that were trained	Number of hours spent by trainer to train	Trainer's cost per hour		Number of hours spent by trainee being trained	Trainee's cost per hour
2006	→	→	→		→	
2005	→	→	→		→	

### 7.0. Overtime

- 7.1. In 2006 or 2005, did the amount you paid in overtime change?  Y  N →Go To 8.0.

7.1.a. Was any portion of this change directly related to the absence of your Guard/Reserve employees serving in the military for more than 30 days?  Y  N →Go To 8.0.

7.1.b. By year, what was the dollar value of the overtime change directly related to the absence of your Guard/Reserve employees?

Year	Increase	Decrease	How many months did this change last?
2006	\$	\$	
2005	\$	\$	

7.1.c. Please briefly describe how the absence of your *Guard/Reserve* employees contributed to this change: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 8.0. Service Providers

8.1.a. Is your organization a state or local government agency?  N  Y →Go To 10.0.

8.1.b. Does your organization deliver services, such as consultants, mechanics, or doctors, to its customers?  Y → Go To 8.1.c.  N →Go To 9.0.

8.1.c. In 2006 or 2005, was there a change in your billable hours, *meaning the number of hours you could sell to your clients*?  Y  N →Go To 8.3.

8.2. Was any portion of this change directly related to the absence of your Guard/Reserve employees serving in the military for more than 30 days?  Y  N →Go To 8.3.

8.2.a. By year, how much did your billable hours change because your Guard/Reserve employees were absent to serve in the military?

Year	Increase in number of hours	Decrease in number of hours	How many months did the change last?
2006	#	#	
2005	#	#	

8.2.b. By year, what was the average hourly rate for these hours?

Year	Average hourly rate per hour billed
2006	
2005	

8.3. By year, what was your organization's percent of profit (or fee)?

Year	Percent of profit	Go To
2006	%→	<b>2005</b>
2005	%→	<b>9.0.</b>

## 9.0. Manufacturers

9.1. Does your organization manufacture any products?  Y  N →Go To 10.0.

9.1.a. In 2006 or 2005, was there a change in your production rate, *meaning the number of units completed per unit of time*?  Y  N →Go To 9.2.b.



9.2. Was any portion of this change directly related to the absence of your Guard/Reserve employees serving in the military for more than 30 days? Y N →Go To 9.2.b.

9.2.a. By year, what was the change in produced units because your employee(s) was (were) absent?

Year	Units increased	Units decreased	How many months did the change last?
2006	#	#	
2005	#	#	

9.2.b. By year, what was average price per unit and percent profit?

Year	Average price per unit	Average percent profit
2006	\$	%
2005	\$	%

### 10.0. Other Operational Impacts

*In this section, we are interested in **any positive or negative operational impacts directly related to the absence of Guard/ Reserve employees serving in the military for more than 30 days, regardless of the year they occurred, and any resulting costs that we have not asked about.** Please include the year of occurrence, the cost, and the approximate recovery time. Please use a separate sheet of paper if necessary and include that sheet in the return envelope with "10.0." written in the top right corner. **Retailers please note:** include losses in this section.*

Year	Description	Costs	Recovery time
			# _____ <input type="checkbox"/> Days <input type="checkbox"/> Months <input type="checkbox"/> Years <input type="checkbox"/> Not recovered
			# _____ <input type="checkbox"/> Days <input type="checkbox"/> Months <input type="checkbox"/> Years <input type="checkbox"/> Not recovered

### 11.0. Group/Team Performance Incentives or Bonuses

*In this section, we are interested in understanding whether or not any employees received any group/team incentives or bonuses.*

11.1. In 2006 or 2005, did your organization pay any group/team incentives or bonuses?

Y N → Go To

12.0.

11.1.a. In 2006 and 2005, as a percentage of total compensation, what percentage was awarded for group/team incentives or bonuses?

Year	2006	2005
Group/team incentives	%	%
Bonuses	%	%

**12.0. Primary Place of Business**

12.1. Is this the headquarters of your organization? N Y →Go To 12.2.

12.1.a. What is the mailing address of the headquarters?

Street Address: \_\_\_\_\_

City and State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

12.2. Does another company own more than 50 percent of your organization?

N Y →Name of parent organization: \_\_\_\_\_

12.3. What is your primary line of business? \_\_\_\_\_

**13.0. Budget (If you are a private organization, please Go To 14.0.)**

13.1. In 2006 and 2005, what was your operating budget and how did it change from the previous year? (**Please check (+) to indicate increase and (-) to indicate decrease**)

Budget	2006	2005
Operating	\$ <input type="checkbox"/> + <input type="checkbox"/> -	\$ <input type="checkbox"/> + <input type="checkbox"/> -
Change	\$ <input type="checkbox"/> + <input type="checkbox"/> -	\$ <input type="checkbox"/> + <input type="checkbox"/> -
No change	<input type="checkbox"/>	<input type="checkbox"/>

13.1.a. Was this for your entire agency (organization) or for one or more divisions within your agency?

Entire agency One division More than one division → How many? \_\_\_\_\_

13.1.b. Was any portion of this change due to the absence of your Guard/Reserve employees?

N →Go To 14.0. Y → What percent? \_\_\_\_\_%

13.1.c. Please briefly describe how the absence of your Guard/Reserve employees caused this change:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**14.0. Comments**

14.1. How can the Department of Defense better support your organization while your Guard/ Reserve employees are serving in the military for more than 30 days?

If you would like to receive a brief report of preliminary survey results being offered to all survey respondents, 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](mailto:DODsurvey@callcresearch.com)

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

Project Number: \_\_\_\_\_