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# National Survey of Veterans, their Spouses and Surviving Spouses

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**US Department of Veterans Affairs**

OMB# XXXX-XXXX

Expiration Date: XXXXXXXXXXXX

## Commonly Asked Questions about the National Survey of Veterans

### **Q. Doesn't the VA know where all veterans are?**

- A. There are many individuals for whom the VA does not have this information. For example, a number of veterans have moved since they were last in touch with the VA. An important goal of this study is to include as many veterans as possible.

### **Q. Why don't you ask any questions about VA benefits or services on this questionnaire?**

- A. The purpose of this first questionnaire is to obtain up-to-date information for as many veterans, spouses, and widows/widowers as possible. Using the information from this first questionnaire, we will send a second questionnaire that will ask about the level of awareness there is of VA benefits and services and whether eligible individuals know how to access those benefits and services.

### **Q. If there are no veterans or spouses in my household should I respond?**

- A. Yes, by returning this questionnaire we will know that we do not need to contact you in the future.

### **Q. Can I use a pencil to fill out this questionnaire?**

- A. Please use a blue or black pen. Do not use a pencil or felt-tip pen.

THANK YOU FOR YOUR GENEROUS COOPERATION. WE UNDERSTAND HOW VALUABLE YOUR TIME AND ATTENTION ARE!

VA may not conduct, sponsor, or require the respondent to respond to this collection of information unless it displays a valid OMB Control Number. All responses to this collection are voluntary. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time necessary for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Failure to furnish the requested information will have no adverse effect on any VA benefits to which you may be entitled.

The information you supply will be confidential and protected by the Privacy Act of 1974 (5 U.S.C. 522a) and the VA's confidentiality statute (38 U.S.C. 5701) as implemented by 38 CFR 1.526(a) and 38 CFR 1.576(b). Disclosure of information involves releases of statistical data and other non-identifying data for the improvement of services with the VA benefits processing system and for associated administrative purposes.

**START** → When responding, please think about everyone who is currently living at this address. Be sure to think about yourself, as well as all the other adults in the household.

1. **Is there anyone in this household who previously served on active duty? (Do not include those currently serving.)**

YES

NO → **Go to Question 8, page 2**

2. **(If YES) How many people in this household previously served on active duty?**

Number who previously served on active duty

3. **Is there anyone in this household who previously served on active duty who is female?**

YES

NO

4. **Please mark the period(s) of service for those in this household that previously served on active duty.**

	YES	NO
September 2001 or later .....	<input type="checkbox"/>	<input type="checkbox"/>
August 1990 to August 2001 (including Persian Gulf War) .....	<input type="checkbox"/>	<input type="checkbox"/>
May 1975 to July 1990 .....	<input type="checkbox"/>	<input type="checkbox"/>
Vietnam era (August 1964 to April 1975) .....	<input type="checkbox"/>	<input type="checkbox"/>
February 1955 to July 1964 .....	<input type="checkbox"/>	<input type="checkbox"/>
Korean War (July 1950 to January 1955) .....	<input type="checkbox"/>	<input type="checkbox"/>
January 1947 to June 1950 .....	<input type="checkbox"/>	<input type="checkbox"/>
World War II (December 1941 to December 1946) .....	<input type="checkbox"/>	<input type="checkbox"/>
November 1941 or earlier .....	<input type="checkbox"/>	<input type="checkbox"/>

5. **Is there anyone in this household who previously served on active duty who is:**

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	18 - 30 years old?
<input type="checkbox"/>	<input type="checkbox"/>	31 - 54 years old?
<input type="checkbox"/>	<input type="checkbox"/>	55 - 74 years old?
<input type="checkbox"/>	<input type="checkbox"/>	75 years and older?

**Please go to next page** →



6. Is there anyone in the household who previously served on active duty who is Hispanic or Latino?

- YES
- NO

7. Is there anyone in this household who previously served on active duty who is:

- |                          |                          |  |
|--------------------------|--------------------------|--|
| YES                      | NO                       |  |
| <input type="checkbox"/> | <input type="checkbox"/> | White?                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | Black or African American?                 |
| <input type="checkbox"/> | <input type="checkbox"/> | Asian?                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | American Indian or Alaska Native?          |
| <input type="checkbox"/> | <input type="checkbox"/> | Native Hawaiian or Other Pacific Islander? |

8. This study will also survey spouses of veterans and widows/widowers of veterans. Please think about everyone who lives in this household (including yourself).

Is there anyone in this household who is:

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | YES                      | NO                       |
| a. married to a veteran? (If you are a veteran, please include your spouse if he/she lives in your household.) ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| b. a widow or widower of a veteran? .....  | <input type="checkbox"/> | <input type="checkbox"/> |

9. We will be sending a more detailed questionnaire to the veteran, spouse of the veteran or the widow/widower. What is the best way for us to send the questionnaire?

- Using the Internet
- Mail a paper survey  $\longrightarrow$  *go to END*
- There are no veterans, spouses or widow/widowers in this household  $\longrightarrow$  *go to END*

10. (If Internet) To assist us sending the questionnaire, please provide an e-mail address.

e-mail address:

- I do not want to provide an e-mail address

**END**

**Please return this questionnaire in the postage paid envelope.**

Thank-you for your assistance!

