**FY 2016 DICRC SURVEY**

**PRENOTICE POSTCARD**

Dear Social Security Applicant:

Social Security believes that conducting surveys is one of the best ways to find out how well we are serving you. That’s why we will soon be asking you to give us your opinion about the service you receivedfor your recent business with Social Security.

In a few days, you will receive a short questionnaire in the mail from *[Contractor]*, who is conducting this survey for Social Security. When you receive their envelope, we hope that you will take the time to answer our questions and tell us what you think of our service.

We look forward to hearing your opinions.

 *Social Security Administration*

**FY 2016 DICRC SURVEY**

**INITIAL COVER LETTER**

Dear Social Security Applicant:

As I noted in my recent postcard, Social Security is conducting a survey to get your opinion of the service you received when you filed an application for Social Security disability benefits. The survey is short and should only take 5 minutes to complete. Please take a few minutes now to answer the questions and return the form as soon as possible in the postage-paid envelope provided. While you are not required to respond, your opinions are very important to us and we would like to hear from as many people as possible. **Please do not put any information related to your Social Security business in the envelope with your completed survey**.

Please be assured that *[insert contractor name]*, who is conducting this survey for us, will only give your responses to my staff here at Social Security and will not use them for any other purpose. Social Security will report the survey results by summarizing the answers of everyone who takes the survey; we will not report any individual responses. Your participation in this survey will not affect your eligibility for benefits or any business you have with Social Security.

If you have any questions about your application or benefits, please call Social Security’s toll-free information line at 1‑800‑772‑1213 or visit our web site at www.socialsecurity.gov.

Thank you for sharing your opinions with us.

 Sincerely,

 *Social Security Administration*

**FY 2016 DICRC SURVEY**

**FOLLOW-UP POSTCARD**

Dear Social Security Applicant:

About two weeks ago wesent you a survey form asking for your opinion of the service you received for your recent business with Social Security.

* **If you have already mailed back your completed survey**, thank you for your quick response.
* **If not**,please take 5 minutes now to complete and return the survey in the postage-paid envelope provided.
* **If you no longer have the survey**,you don’t need to do anything. *[Contractor]*,who is conducting the survey for us,will be mailing another form to you shortly.

Thank you for your help with this survey.

 *Social Security Administration*

**FY 2016 DICRC SURVEY**

**FOLLOW-UP COVER LETTER**

Dear Social Security Applicant:

About a month ago we sent you a brief survey asking about the service you received when you filed an application for Social Security disability benefits. We haven’t yet heard from you and it’s important that we gather opinions from as many people as possible.

If you recently mailed in your completed survey form, please discard this letter. We sincerely appreciate your help and we look forward to receiving your response. However, if you have not yet returned the survey, please take 5 minutes now to complete it and send it back. For your convenience, we have enclosed another copy along with a postage-paid return envelope. **Please do not put any information related to your Social Security business in the envelope with your completed survey.**

Please be assured that *[Contractor]*, who is conducting this survey for us, will only give your responses to the staff here at Social Security and will not use them for any other purpose. Social Security will report the survey results by summarizing the answers of everyone who takes the survey; we will not report any individual responses. Your participation in this survey will not affect your eligibility for benefits or any business you have with Social Security.

If you have any questions about your hearing request or benefits, please call Social Security’s toll-free information line at 1‑800‑772‑1213 or visit our web site at [www.socialsecurity.gov](http://www.socialsecurity.gov).

We would appreciate receiving your completed survey as soon as possible.

 Sincerely,

 *Social Security Administration*

***PRIVACY ACT STATEMENT***

The Social Security Administration is authorized to collect the information for this survey under Executive Order 12862, “Setting Customer Service Standards.” Your response to these questions is strictly voluntary. The information you provide will be used to help us improve the service that we give you. Your response will not be disclosed to any other government or private agency.

***PAPERWORK REDUCTION ACT STATEMENT***

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by Section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 5 minutes to read the instructions, gather the facts, and answer the questions. *You may send comments on our time estimate above to: Social Security Administration, 6401 Security Blvd., Baltimore, MD 21235-6401.* ***Send only comments relating to our time estimate to this address, not the completed form.***