## <<Month, Day, Year>>

«I\_First» «I\_Last»
«ADDRESS1»
«ADDRESS2»
«ADDRESS3»
«CITY», «STATE» «ZIP»
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Dear «I\_First» «I\_Last»:

You were recently contacted by «A\_First» «A\_Last», an Investigator with the U.S. Office of Personnel Management. You were contacted as part of a Federal background investigation of «S\_First» «S\_Last» being conducted by our Federal Investigative Services.

We are proud of our reputation as a provider of background investigations and we strive to ensure that our investigations are conducted on the highest professional level. We have found that comments and suggestions from individuals who have been interviewed are extremely helpful in achieving this goal.

You are not required to respond to this letter, but I will appreciate your completing the brief questionnaire on the other side of this page. If your name and/or address are incorrectly shown on this letter, please correct your name and/or address where they are shown above.

We are enclosing a pre-addressed, postage-free envelope for you to use to return the questionnaire. Thank you for your assistance with the investigation and for your time and effort completing this inquiry.

Sincerely,

Merton W. Miller Associate Director

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Federal Investigative Services

## Enclosure

Privacy Act Statement: This inquiry is in full compliance with the Privacy Act of 1974 (5 U.S.C. 552a), as amended. The information you furnish will be used to assess the quality, conduct, and professionalism of the investigator listed above. Completing this form is voluntary. The information you provide, including your identity, may be released to the investigator listed on the form, if requested. In addition to those disclosures generally permitted under 5 U.S.C. 552a(b), all or a portion of the records or information contained in this system may be disclosed outside OPM as a routine use pursuant to 5 U.S.C. 552a(b)(3).

Public Burden Information: Public burden reporting for this collection of information is estimated to take approximately six minutes per response. This includes time for reading the letter and for reviewing and completing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Federal Investigative Services Forms Manager. U.S. Office of Personnel Management, 1900 E Street NW, Paperwork Reduction (3206-0106), Washington, D.C. 20415. The OPM Number, 3206-0106, is currently valid. OPM may not collect this information unless this number is displayed.

Were you interviewed in person or over the phone?	□ IN PERSON (Go to Question 2a)	□ BY PHONE (Go to Question 2b)
2a		
For interviews conducted in person:  Was the Investigator dressed professionally and well groomed?	□ YES	□ NO
Did the Investigator show you credentials and introduce himself/herself as a Special Agent or Investigator with the U.S. Office of Personnel Management?	□ YES	a NO
Were you interviewed in private? If "NO", please explain:	□ YES	o NO
For interviews conducted by phone:  Did the Investigator introduce himself/herself as a Special Agent or Investigator with the U.S. Office of Personnel Management?  Please check the reason for the telephone interview:  MY REQUEST INVESTIGATOR'S REQUEST NO	□ YES REASON GIVEN	□ NO
Was the Investigator polite and professional?	o YES	□ NO
Did the Investigator explain that the interview was for employment or security clearance purposes?	u YES	□ NO
Were questions presented in a clear manner so that they could be understood easily?	□ YES	□ NO
The information you provided about the person being investigated (check one)	was favorable.	included issues
If you told the Investigator about concerns regarding the person being investigated, briefly identify those co (For examplecriminal conduct, illegal drug use, alcohol abuse, violent behavior, foreign travel)  CONCERNS:	ncerns below:	or concerns.
7 Please provide any additional comments or concerns you have about the interview, the investigation, or the	investigator.	
Is it necessary for a representative from OPM to contact you?	□ YES	no No
Signature: Date:		
Please provide your contact information:		
Daytime telephone number: ( )		
Email address:		