

FY18 LEEP Annual Assessment



1. How often do you log on to LEEP?

- Daily
- Weekly
- Monthly
- Several times per year
- Less than four times per year

2. How long have you been a LEEP user?

- Less than six months
- Six months to one year
- One to two years
- Two years to four years
- Four or more years

3. What is your primary jurisdiction type? (Please select the one jurisdiction type most in line with your employer)

- Federal
- State
- Local
- Territorial
- Tribal
- International
- Private Sector
- Other (please specify)

4. What is your primary mission area? (Select all that apply)

- Cybersecurity
- Emergency Management
- Fire Services
- Homeland Defense
- Intelligence
- Law Enforcement
- Public Health

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5. In what ways do the LEEP services support your operational needs? (Select all that apply)

- Tactical Mission Support
- Exercise Planning and Management
- Incident Response
- Training Delivery
- Intelligence Sharing
- Investigative Support
- Planning and Coordination
- Other (please specify)

6. In the past year, have any LEEP services helped you with an investigation?

- Yes
- No

If yes and you would like to give a description to use in our newsletters, please email us at osou@leo.gov.

7. What service(s) would you like to see added to LEEP?

8. What functionality would you like to see added to LEEP?

9. Do you use LEEP on your mobile device?

- Yes
- No

10. Would a LEEP mobile app improve efficiencies in your job?

- Yes
- No

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