**1652-0013 Customer Satisfaction Questions:**

Passenger Survey Questions

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| **Question Category** | **OMBQ#** | **Question and Responses** |
| Confidence in Security Procedures | 2 | **How confident are you that the security screening procedures that were used on you and your baggage are effective at keeping air travel secure?**   * VERY CONFIDENT * FAIRLY CONFIDENT * NOT VERY CONFIDENT * NOT AT ALL CONFIDENT |
| 5 | **How satisfied were you that you and your carry-on items were effectively screened?**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| Confidence in Screening Equipment | 7 | **How confident are you that <THE DEVICE> used to screen your carry-on baggage is effective at finding items that could be dangerous?**  *Blank Fill: “the X-ray”*   * VERY CONFIDENT * FAIRLY CONFIDENT * NOT VERY CONFIDENT * NOT AT ALL CONFIDENT |
| Confidence in Personnel | 9 | **How confident are you in the ability of the TSA personnel you experienced at the checkpoint today to keep air travel secure?**   * VERY CONFIDENT * FAIRLY CONFIDENT * NOT VERY CONFIDENT * NOT AT ALL CONFIDENT |
| Experience at Checkpoint | 10 | **How satisfied were you overall with your experience at the passenger security checkpoint?**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| Experience at Checkpoint/Satisfaction with Wait Time | 18 | **Please consider the following statement. The amount of time it took to be screened by the <device> was reasonable."**  *Blank Fill: “X-ray Baggage Screening System”*   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| Experience at Checkpoint | 19 | **Please consider the following statement. I feel that I was adequately informed about <specific policy>** **before I arrived at the passenger security checkpoint today."**  *Blank Fill: “how to place my property into bins”*   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| 20 | **Overall, the security screening process was efficient and passenger-friendly.**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| 21 | **Overall, the security screening process was thorough and professional.**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| 23 | **There was enough space in front of the X-Ray area to allow you to prepare.**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| 24 | **The flow of passengers through the checkpoint gave you enough time to prepare.**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| 25 | **There was enough space for you to gather your belongings after security.**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| Satisfaction with Wait Time | 30 | **How satisfied were you with the length of time you waited in line before the passenger security checkpoint?**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| Separation from Belongings | 38 | **If you were separated from your carry-on items, could you maintain visual contact with the items at all times?**   * YES * NO * DON'T KNOW * WAS NOT SEPARATED FROM MY CARRY-ON ITEMS |
| Separation from Others in Party | 40 | **During any point in the screening process, were you separated from any other people with whom you were traveling?**   * NO * YES * I WAS NOT TRAVELING WITH ANYONE |
| 41 | **If you were separated from your travel companion(s), were you able to see them and speak with them at all times?**   * NO * YES * I WAS NOT TRAVELING WITH ANYONE |
| Stress Level | 42 | **How comfortable were you with your experience at the security screening checkpoint?**   * VERY RELAXED * SLIGHTLY RELAXED * NEITHER RELAXED NOR STRESSED * SLIGHTLY STRESSED * VERY STRESSED |
| Convenience of Divesting | 43 | **The <PROCEDURE OR EQUIPMENT> at the checkpoint makes the security screening process:**  *Blank Fill: “X-ray Baggage Screening System”*   * VERY EASY * EASY * SOMEWHAT DIFFICULT * DIFFICULT * VERY DIFFICULT |
| 44 | **From start to finish how easy was it for you to physically comply with the security requirements? Please explain.**   * OPEN-ENDED |
| Quality of Checkpoint Communication | 46 | **How satisfied were you with the way security procedures were explained to you at the passenger security checkpoint?**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| 47 | **Were verbal instructions from the officers needed?**   * YES * NO |
| 49 | **Were the officers' verbal instructions clear?**   * YES * NO |
| 50 | **Were the officer's verbal instructions helpful?**   * YES * NO |
| 52 | **Were the officer's verbal instructions sufficient to complete security screening?**   * YES * NO |
| Quality of Printed or Posted Materials | 57 | **Were additional printed materials needed at the checkpoint?**   * YES * NO |
| 59 | **Were printed materials clear?**   * YES * NO |
| 60 | **Were printed materials helpful in moving you through the checkpoint?**   * YES * NO |
| 63 | **Did signage effectively guide you through the security process?**   * YES * NO |
| 65 | **Did signage clearly explain new technology at the checkpoint?**   * YES * NO |
| 67 | **How satisfied were you with the information about security procedures you received at the airport (e.g., via the signs and/or television monitors at the checkpoint or information conveyed by TSA personnel during the screening process)?**   * VERY/STRONGLY POSITIVE * POSITIVE * NEITHER POSITIVE NOR NEGATIVE * NEGATIVE * VERY/STRONGLY NEGATIVE * DON'T KNOW * CHOOSE NOT TO ANSWER |
| Customer Service – Personnel Attentiveness to Duty | 71 | **How would you rate the thoroughness of passenger screening you received?**   * EXCESSIVE * APPROPRIATE * INADEQUATE * DON'T KNOW |
| Passenger Demographic Information – General | 75 | **How old are you?**   * between 18 and 20 * between 20 and 29 * between 30 and 39 * between 40 and 49 * between 50 and 59 * between 60 and 69 * between 70 and 79 * over 79 |
| 76 | **What is your gender? (Optional)**   * MALE * FEMALE |
| Passenger Demographic Information – Purpose of Travel | 77 | **What is the purpose of your trip today?**   * BUSINESS * LEISURE * OTHER |
| Passenger Demographic Information – Frequency of Travel | 78 | **About how many round trip commercial airline flights have you taken in the last 12 months (INCLUDING THIS ONE)?**   * 1-2 * 3-5 * 6-9 * 10-19 * 20 OR MORE |

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