



**U.S. DEPARTMENT OF STATE  
AMERICAN CITIZEN SERVICES APPLICANT  
SATISFACTION SURVEY**

OMB No: 1405-0193  
Expiration Date: 07/31/2017  
Estimated Burden: 3 minutes  
SV-2015-0005

We ask that you take a brief survey to assess your experience with the United States consular section at the U.S. [Embassy/Consulate General name]. Your responses will be kept private and not associated with you or your case. We are only conducting this survey to improve our service.

1. U.S. Embassy/Consulate General [Dropdown option choices for electronic survey or write-in option for paper]

2. Indicate service received:

- U.S. Passport
- Consular Report of Birth Abroad
- Notary Services
- Other \_\_\_\_\_

**PREPARING FOR YOUR APPOINTMENT**

1. 3. How did you obtain information to prepare for your appointment? Check all that apply.

	If used, was source helpful?	
	Yes	No
• Family member or friend	<input type="checkbox"/>	<input type="checkbox"/>
• Attorney/Notary	<input type="checkbox"/>	<input type="checkbox"/>
• Consultant	<input type="checkbox"/>	<input type="checkbox"/>
• U.S. Department of State website (travel.state.gov)	<input type="checkbox"/>	<input type="checkbox"/>
• [Embassy/Consulate General name] website in English	<input type="checkbox"/>	<input type="checkbox"/>
• [Embassy/Consulate General name] website in [country's official language]	<input type="checkbox"/>	<input type="checkbox"/>
• [Embassy/Consulate General name] phone or email in English	<input type="checkbox"/>	<input type="checkbox"/>
• [Embassy/Consulate General name] phone or email in [country's official language]	<input type="checkbox"/>	<input type="checkbox"/>
• [Embassy/Consulate General name] social media (e.g., Facebook, Twitter)	<input type="checkbox"/>	<input type="checkbox"/>
• Other _____	<input type="checkbox"/>	<input type="checkbox"/>

4. Did you need help in completing the forms?

- No
- Yes, by a family member or friend
- Yes, by an attorney/notary
- Yes, by contacting the [Embassy/Consulate General name] by phone or email in English
- Yes, by contacting the [Embassy/Consulate General name] by phone or email in [country's official language]
- Yes, other \_\_\_\_\_
- No forms were required for the service I received.

5. If you used the [Embassy/Consulate General name] website, were instructions and requirements clear (i.e., documents needed for appointment, items allowed inside the [Embassy/Consulate General name])?

- Yes
- No
- I did not use the [Embassy/Consulate General name] website

6. Prior to your appointment, which of the following would you have liked to receive additional information about?

- What to expect at the appointment (i.e., the security process, waiting room experience, parking, appointment time and duration)
- Prohibited items that are not allowed in the [Embassy/Consulate General name]
- Supporting documentation required (e.g., proof of identity, birth certificate)

- Information on how to change appointment time
- Document delivery service
- Other \_\_\_\_\_

**APPOINTMENT SCHEDULING**

7. Was it convenient to make an appointment for the date and time you wanted?

- Yes
- No, I needed an earlier appointment date, and one was not available.
- No, other: \_\_\_\_\_

8. If it was difficult for you to schedule or reschedule your appointment, please indicate why. Check all that apply.

- The scheduling or rescheduling process was confusing.
- I do not have access to or use the internet.
- I had to call the [Embassy/Consulate General].
- Other \_\_\_\_\_

**DURING THE APPOINTMENT**

4. 9. Please rate your visit to [Embassy/Consulate General name].

	Excellent	Satisfactory	Needs Improvement
Courtesy of the security guards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtesy of the consular staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Answers to your questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation regarding your case	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness and comfort of the waiting area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Duration of wait time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please use the space below for any additional suggestions on what we could improve.

Public reporting burden for this collection of information is estimated to average 3 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: Department of State, Bureau of Consular Affairs, ATTN: Catherine Barry, 600 19<sup>th</sup> Street, N.W., Washington, DC 20036.

DRAFT