## Individual Information Collection Request

Under GSA’s Generic Clearance: Improving Customer Experience - Implementation of Section 280 of OMB Circular A-11

OMB Control No. 3090-0321



**QUESTIONS:**

Please include all questions and response options (either multiple choice options or free text fields, etc.):

(Page 1)

1. I am satisfied with the service I received from the program area.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree
1. This interaction increased my confidence in the program area.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree
1. How could we have made your experience better?

(Free Text Field)

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1. Please rate your satisfaction with the accuracy of information found on the FAQ Site (www.hud.gov/answers).
* Very Dissatisfied
* Dissatisfied
* Neutral
* Satisfied
* Very Satisfied
1. Please rate your satisfaction with your ability to effectively search the FAQ Site for policy or program information ([www.hud.gov/answers](http://www.hud.gov/answers)).
* Very Dissatisfied
* Dissatisfied
* Neutral
* Satisfied
* Very Satisfied
1. My need was addressed.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree
1. It was easy to complete what I needed to do.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree
1. It took a reasonable amount of time to do what I needed to do.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree
1. I was treated fairly.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree
1. Employees I interacted with were helpful.
* Strongly Disagree
* Disagree
* Neutral
* Agree
* Strongly Agree

**SCREENSHOTS:
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**ADMINISTRATION DETAILS:**

The following will be displayed on this Touchpoints survey:

OMB Control No. 0690-0030, Expiration Date: XX/XX/XXXX