<u>LIVE TEST SURVEY – OVERALL</u>

Submit a request

ields marked with * are required.
lease choose your issue below
WEA Live Test Survey
our email address*
you have a control group ID number [NNNNN], please enter it here. Otherwise, leave nis field blank.
id you receive the WEA test alert?*
lease enter the date and time that you received the alert [MM/DD/YY HH:MM AM/PM]:*
/hat is the make and model of your mobile device (e.g., "Samsung Galaxy S10," "Apple Phone X.")? If you do not know, leave this field blank.

What is your mobile device's operating system?*	
- v	
Who is your wireless service provider?*	
Where were you when you received the alert? Please provide a street address or other detailed description. If you did not receive the alert, leave this field blank. Street Address	
City	
State/Territory	
Zip Code	
Other detailed description of location	

Did your mobile device have cellular service on your service provider's network when the alert was sent?*
-
What type of cellular service did your mobile device have? If your device did not have cellular service, leave this field blank.*
-
Was your device in use when alert was sent (for example, were you on a call, surfing the web, using an app or sending a text)?*
-
Did the alert contain the following message "[WEA ALERT TEXT]"? If you did not receive the alert, leave this field blank.*
-
Did you receive the alert more than once? If you did not receive the alert, leave this field blank. Provide any additional information you would like to optionally share about the test in the Description field that follows this question.
- v
Description*

<u>LIVE TEST SURVEY – PULL-DOWN MENUS</u>

Did you receive the WEA test alert?*

-	
Yes	
No	
Not sure	

What is your mobile device's operating system?*

Apple iOS
Android
Other / Not sure

Who is your wireless service provider?*



Did your mobile device have cellular service on your service provider's network when the alert was sent?*

-
Yes (my device had service and was not roaming)
No (my device did not have service or was roaming)
Not Sure
-

What type of cellular service did your mobile device have? If your device did not have cellular service, leave this field blank.*



Was your device in use when alert was sent (for example, were you on a call, surfing the web, using an app or sending a text)?*



Did the alert contain the following message "[WEA ALERT TEXT]"? If you did not receive the alert, leave this field blank.*

-
Yes
No
I did not receive the alert
Not sure

Did you receive the alert more than once? If you did not receive the alert, leave this field blank. Provide any additional information you would like to optionally share about the test in the Description field that follows this question.

-	
Yes	
No	
Not sure	

We have estimated that your response to this collection of information will take 15 minutes or 0.25 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060 XXXX). We will also accept your PRA comments via the Internet if you send an e-mail to PRA@fcc.gov.

Please DO NOT SEND COMPLETED SURVEYS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060 XXXX.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.