The Veterans Crisis Line provides free, confidential support for Veterans in crisis and their family and friends. Dial 1 (800) 273-8255 (Press 1), or text 838255 to receive confidential suppot 24/7 (System of Records Notice VA115588VA1100NC5). Visit https://www.veteranscrisisline.net for more information.

OMB Number: 2900-0876 Expiration: 09/30/2023 Estimated Burden: 2 minutes

## Help us serve you better.

Tell us about your experience with filing your appeal.

Please respond to the following statements on a scale of 1 (Strongly Disagree) to 5 (Strongly Agree).

I clearly understood how to file an appeal to the Board of Veterans' Appeals. Required

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	
1	2	3	4	5	

I received a response to filing my appeal from the Board of Veterans' Appeals in a timely fashion. Required

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	
1	2	3	4	5	

The notification letter from the Board of Veterans' Appeals explained things in a way that was easy for me to understand. Required

Strongly Disagree			Agree	Strongly Agree	
1	2	3	4	5	

I am satisfied with the service I received from the Board of Veterans' Appeals. Required

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

I trust the Board of Veterans' Appeals to fulfill our country's commitment to Veterans and their families. Required

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

the Board of Veterans' Appeals. Required	or virtually with

Please explain why you did or did not choose to request a hearing (in person or virtual) with

400	 		

recommendation about your experience with filing your Appeal? Please select from one of the following options.

Use the text box below to enter details of the additional feedback (optional). Ple not include any personally identifiable information, Social Security Number, Vet	

or medical information, but do provide details about your experience.

0/400					
Nould you like to v	olunteer your	demographic	information to h	elp VA better s	erve you?

○ Yes ○ No

- Select your response -

Because serving you is our top priority, if you provide feedback, you may be contacted by VA.

We are asking for this information so that you can provide compliments, recommendations, or concerns to VA. By filling out this survey, you are authorizing VA database access to retrieve Veteran contact information to follow up with you accordingly

for purposes of service recovery, potential crisis, or to learn more about feedback you have shared regarding your experience with VA. VA may utilize individual Veteran survey data from this survey or other sources to ensure the final scores truly and accurately represent the experiences of Veterans. This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 2 minutes to review the instructions and complete this survey. The results of this survey will be used to inform opportunities for program improvement in the quality of VA services. Participation in this survey is voluntary, and your decision not to respond will have no impact on VA benefits or services which you may currently be receiving. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at <a href="https://www.reginfo.gov/public/do/PRAMain">https://www.reginfo.gov/public/do/PRAMain</a>. Information gathered will be kept private to the extent provided by law.

Next



## **Help VA improve its Services**

Are you Hispanic or Latino?

We are working to better understand our customers. The following questions are **voluntary**. By providing your data, your responses can help us improve VA care and services. Thank you for your participation.

7 110 your moparito or	
○ Yes	
○ No	
What is your race? Please select one or more.	
☐ American Indian or Alaska Native	
□ Asian	
□ Black or African American	
□ Native Hawaiian or Other Pacific Islander	
□ White	
How would you describe your gender?	
○ Male	
○ Female	
O Non-Binary/ Third Gender	
O Prefer not to say	

**Finish** 



Thank you for taking the time to fill out this survey. We greatly appreciate your feedback which will help us better serve you. Please visit <u>VA.gov</u> to explore benefits, resources, and information at VA.

<u>The Veterans Crisis Line</u> provides free, confidential support for Veterans in crisis and their families and friends. Dial 1 (800) 273-8255 (Press 1), or text 838255 to receive confidential support 24/7. Visit <a href="https://www.veteranscrisisline.net/">https://www.veteranscrisisline.net/</a> for more information