



U.S. Department  
of Veterans Affairs

The VA provides free, confidential support 24/7 for Veterans and their family and friends. If you are in crisis, contact the **Veterans Crisis Line** by dialing 1 (800) 273-8255 (Press 1), or texting 838255, or visiting <https://www.veteranscrisisline.net>. If you are homeless or at risk of homelessness, contact the **National Call Center for Homeless Veterans (NCCHV)** by dialing 1 (877) 424-3838 or visiting <https://www.va.gov/HOMELESS/>.

OMB Number: 2900-0876  
Expiration: 03/31/2023  
Estimated Burden: 2 minutes

## Help us serve you better.

We want to hear about your recent interaction. By indicating how much you agree or disagree with the statements below, you directly help us improve VA services.

This survey should take approximately 2 Minutes to complete.

**The [Agent] took a reasonable amount of time to address my need.**

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

**After speaking with the Customer Service Representative I understood what would happen next with my request.**

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

**The [Agent] I interacted with was helpful.**

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

**I am satisfied with the service I received from [contact center].**

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

**I trust VA to fulfill our country's commitment to Veterans.**

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

Would you like to provide additional feedback with a concern, compliment, or recommendation about your recent interaction?

Please select from one of the following options.

Select your response ▼

[ Logic ]

Use the text box below to provide details about your experience. Please do not include any personally identifiable information, Social Security Number, Veteran ID, or medical information.

0/400

**Can VA contact you about your feedback?**

- Yes, VA can contact me about my experience.
- No, I do not want VA to contact me about my experience.

**Would you like to volunteer your demographic information to help VA better serve you?**

- Yes [\[Logic proceed to Demographics page\]](#)
- No [\[Logic skip Demographics page\]](#)

Next

We are asking for this information so that you can provide compliments, recommendations, or concerns to VA. 1 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. 2 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. 3 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 <https://www.reginfo.gov/public/do/PRAMain>. Information gathered will be kept private to the extent provided by law.

[Logic: 1). Required if CCR Open Text Box is included on survey. 2). Required if Service Recovery. 3). Required unless exception.]

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## Help VA improve its services.

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.

### Are you Hispanic or Latino?

- Yes  
 No

### How would you describe your race? Please select all that apply.

- 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  
 Non-Binary/ Third Gender  
 Prefer not to say

[Finish](#)

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# Thank you for choosing VA.

The U.S. Department of Veterans Affairs uses these surveys to collect your feedback in order to continuously to improve your experience with VA services.

Please visit [VA.gov](https://www.va.gov) to explore benefits, resources, and information at VA.

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