Department of Veterans Affairs

Feedback on the Educational Assistance Programs Administered by the VA

The Department of Veterans Affairs (VA) requests your help in an important research study about the educational assistance programs administered by the VA. The educational assistance programs administered by the VA provide financial assistance to Veterans to help cover the cost of school and training. The information from this study will help the VA improve the programs and better serve Veterans interested in educational assistance. Please complete this questionnaire, which will take about 5 minutes or less.

Your participation in the survey is completely voluntary. You may refuse to participate or end the survey at any time without penalty or loss of benefits to which you may otherwise be entitled.

All information you provide will be kept confidential. No individual person will be identified in any reports resulting from the study.

Thank you for your time and for your service!

1. What education and training have you COMPLETED? Mark (X) for the highest degree received.

HIGH SCHOOL GRADUATE

- o Regular high school diploma
- o GED or alternative credential

TRAINING FOR A CAREER, TRADE, OR INDUSTRY

- o Non-College Degree Programs (HVAC repair, truck driving, or EMT training)
- o VET TEC Program
- o Flight Training
- o On-the-Job Training & Apprenticeships (plumbing, hotel management, or firefighting)
- o Other Education or Training
 - i. Specify: _____

COLLEGE OR SOME COLLEGE

- o Some college credit, no degree
- o Associate's degree (for example: AA, AS)
- o Bachelor's degree (for example: BA, BS)

AFTER BACHELOR'S DEGREE

- o Master's Degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- o Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- 2. What is your sex?
 - o Male
 - **o** Female
 - o Prefer not to answer
- 3. What is your age?
 - **o** _____(years)
- 4. What is your race? Mark one or more boxes
 - o White

| | 0 | Hispanic, Latino, or Spanish | | | | |
|--|-------------------------------|--|--|--|--|--|
| | 0 | Black or African American | | | | |
| | 0 | Asian | | | | |
| | 0 | American Indian or Alaska Native | | | | |
| | 0 | Middle Eastern or North African | | | | |
| | 0 | Native Hawaiian or Other Pacific Islander | | | | |
| | 0 | Other | | | | |
| | | i. (specify) | | | | |
| _ | 0 | Prefer not to answer | | | | |
| 5. | | ur current employment status? Are you working full time, part time, or not at all? | | | | |
| | Mark (X) ONE box. o Full time | | | | | |
| | | | | | | |
| | o Part tir o Not at | | | | | |
| | 0 NOL at | all | | | | |
| 6. | Which brar | nch of the Armed Forces were you sworn into? Check ALL that apply. | | | | |
| | • | (go to q7) | | | | |
| | o Navy. | (go to q8) | | | | |
| | o Air For | rce(go to q9) | | | | |
| | | e Corps(go to q7) | | | | |
| | o Coast | Guard(go to q8) | | | | |
| | o Space | Force(go to q9) | | | | |
| | o Army F | Reserves(go to q7) | | | | |
| | o Navy F | Reserves(go to q8) | | | | |
| | o Air For | orce Reserves(go to q9) | | | | |
| | o Marine | Marine Corps Reserves(go to q7) | | | | |
| | | | | | | |
| | o Air Nat | tional Guard(go to q9) | | | | |
| | o Army N | National Guard(go to q7) | | | | |
| | - | n dependent(go to q10) | | | | |
| | o Other | | | | | |
| | i. | (specify)(go to q10) | | | | |
| | | | | | | |
| 7. | What was | your Primary Military Occupational Specialty (MOS)? | | | | |
| | o Enter l | Number:(go to q10) | | | | |
| | | | | | | |
| 8. | | your Primary Rating? | | | | |
| | o Enter l | Number:(go to q10) | | | | |
| | \\/hot \\/oo | your Primary Air Force Specialty Code? | | | | |
| 9. | | Number:(go to q10) | | | | |
| | o Enter l | Number(go to q10) | | | | |
| The ne | ovt cot of a | uestions are about the educational assistance programs administered by the | | | | |
| | | es called "GI Bill" benefits, "Post-9/11 GI Bill benefits," "Montgomery GI Bill | | | | |
| | | fits," and "Montgomery GI Bill Selected Reserve benefits." These programs | | | | |
| | | assistance for education and training to qualifying Veterans and family | | | | |
| memb | | | | | | |
| | | | | | | |
| 10. | . Did you be | gin an education or training program using educational assistance programs | | | | |
| administered by the VA? Mark (X) ONE box. | | | | | | |
| o Yes, using my education entitlement(go to q11) | | | | | | |
| o Yes, using an education entitlement transferred to me from a Veteran relative . | | | | | | |
| | q11) | | | | | |
| | | am the recipient of a Fry Scholarship (go to q11) | | | | |
| | | ransferred my education entitlement to my dependent(END of survey) | | | | |
| o No. neither I nor my dependents have used a VA education entitlement(go to g12) | | | | | | |

- 11. Under which GI Bill did you elect your benefits? Check all reasons that apply.
 - o Post-9/11 GI Bill (Chapter 33)...(go to g13)
 - o Montgomery GI Bill Active Duty (Chapter 30) ...(go to q13)
 - o Montgomery GI Bill Selected Reserve (Chapter 1606)...(go to q13)
 - o Survivors' and Dependents' Educational Assistance (Chapter 35) ... (go to q13)
 - o Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) (Chapter 32) ... (go to 13)
 - o Reserve Educational Assistance Program (REAP) (Chapter 1607) ... (go to 13)
 - o Do Not Know ... (go to q13)
- 12. Did any of the circumstances below prevent you from using educational assistance programs administered by the VA to pursue your desired education or training path? (Check all reasons that apply. After this, go to END of survey)
 - o Physical or medical problems
 - o Financial difficulties
 - o Illness or death in immediate family
 - o Family responsibilities
 - o Ineligible for Educational Assistance Program
 - o Education or training program was canceled
 - o Change in employment
 - o Moved
 - Unanticipated active military service, including active duty for training
 - o Other
 - i. Specify:
- 13. Did you enroll in the education or training program... (Check all reasons that apply)
 - o To earn a degree?
 - o To earn or keep a state, industry, or company certificate or license?
 - o To get a new job with a different employer?
 - o To help get a raise or promotion?
 - o To meet a requirement for public assistance?
 - o To maintain or improve skills or knowledge you already had?
 - o To learn new skills or methods you did not already know?
 - o To improve the way you feel about yourself?
 - o To make it easier to do things on a day-to-day basis?
 - o Other
- 14. What kind of institution provides/provided your education or training? Mark (X) ONE box.
 - o College/University
 - o Community/Junior College
 - o Vocational/Technical/Occupational School
 - o Other School or School District (Elementary, Junior High, High School, or Adult Learning Center)
 - o Private Business/Company/Hospital
 - o Government Agency (Federal, State, Local)
 - o Professional Association/Organization/Union
 - o Other
 - i. Specify
- 15. Are/were you enrolled in the education or training program on a full-time or part-time basis?
 - o Full time
 - o Part time

The next section will ask about your satisfaction with educational assistance programs administered by the VA.

16. OVERALL, how satisfied are you with the educational assistance programs administered by the VA?

| 0 | Very satisfied | | | | | |
|--|--|--|--|--|--|--|
| 0 | o Satisfied | | | | | |
| 0 | Neither satisfied nor dissatisfied | | | | | |
| 0 | o Dissatisfied | | | | | |
| o Very dissatisfied | | | | | | |
| 17. How satisfied are you with the process to get your educational assistance program benefits? | | | | | | |
| 0 | | | | | | |
| 0 | Satisfied | | | | | |
| 0 | Neither satisfied nor dissatisfied | | | | | |
| o Dissatisfied | | | | | | |
| o Very dissatisfied | | | | | | |
| 18. When plan | ning your education or training path, how satisfied were you with the availability of | | | | | |
| VA resour | | | | | | |
| 0 | Very Satisfied | | | | | |
| 0 | Satisfied | | | | | |
| 0 | Neither Satisfied nor Dissatisfied | | | | | |
| 0 | Dissatisfied | | | | | |
| 0 | Very Dissatisfied | | | | | |
| 19. Did you inte | eract with a School Certifying Official at your education or training institution? | | | | | |
| 0 | Yes(go to q20) | | | | | |
| 0 | No(go to q21) | | | | | |
| 20. How satisfi | ed were you with your education or training institution's School Certifying Official? | | | | | |
| 0 | Very Satisfied | | | | | |
| 0 | Satisfied | | | | | |
| 0 | Neither Satisfied nor Dissatisfied | | | | | |
| 0 | Dissatisfied | | | | | |
| 0 | Very Dissatisfied | | | | | |
| 21. When decid | ding whether or not to use educational assistance programs administered by the | | | | | |
| | ı use (yes or no box next to each option below) | | | | | |
| | VA.gov website | | | | | |
| 0 | VA GI Bill Comparison Tool | | | | | |
| 0 | VA Regional Office | | | | | |
| 0 | School Certifying Official (a VA representative at the college or university) | | | | | |
| 0 | Veterans Service Organization (a VA partnership agency that assists service | | | | | |
| | members) | | | | | |
| 0 | Other | | | | | |
| \ | Specify: | | | | | |
| | ding among different possible education and training programs, did you use | | | | | |
| | oox next to each option below) | | | | | |
| 0 | VA.gov website | | | | | |
| 0 | VA GI Bill Comparison Tool | | | | | |
| o VA Personalized Career Planning and Guidance program | | | | | | |
| o VA WEAMS Institution Search tool | | | | | | |
| o Department of Education College Resource Tool | | | | | | |
| o Personal or Professional Reference | | | | | | |
| 0 | Other | | | | | |
| 0 | Specify: | | | | | |
| - | our educational or training program offer any services or benefits for Veterans? | | | | | |
| | Yes(go to q24) | | | | | |
| 0 | No(go to q25) | | | | | |
| 0 | Don't know(go to q25) | | | | | |
| | | | | | | |

| 24. | Please describe the services or benefits your educational/training program offered Veterans. |
|-----|--|
| | esponse was, "Yes, using an education entitlement transferred to me from a Veteran e," SKIP TO Q24 |
| 25. | Has the VA determined that you have a service-connected disability; that is, a health condition or impairment caused or made worse by military service? o Yes o No |
| 26. | The VA Vocational Rehabilitation and Employment (VR&E) program—also referred to as Chapter 31—provides vocational training and rehabilitation to Veterans with service-connected disabilities that limit or prevent them from working. Were or are you eligible for vocational training and rehabilitation benefits under Chapter 31 of Title 38, United States Code? Mark (X) ONE box. O Yes O No O Do Not Know |
| 27. | Did you use vocational training and rehabilitation benefits under Chapter 31 of Title 38, United States Code? Mark (X) ONE box. o Yes o No o Do Not Know |
| 28. | The VA Transition Assistance Program (TAP) provides information, resources, and tools to service members and their loved ones to help prepare for the change from military to civilian life, including guidance on Veteran benefits, education options, federal assistance and Veteran employment help. Did you participate in the VA Transition Assistance Program (TAP)? o Yes(go to q29) o No(go to q30) |
| 29. | Overall, how effective was the Transition Assistance Program (TAP)? o Extremely effective o Very effective o Moderately effective o Slightly effective o Not at all effective |
| 30. | How effective was the VA Transition Assistance Program (TAP) at informing you about your eligibility for educational assistance programs administered by the VA? o Extremely effective o Very effective o Moderately effective o Slightly effective o Not at all effective |
| 31. | How effective was the VA Transition Assistance Program (TAP) at informing you how to apply for educational assistance programs administered by the VA? o Extremely effective o Very effective o Moderately effective o Slightly effective o Not at all effective |
| 32. | How effective was the VA Transition Assistance Program (TAP) in guiding you how to use educational assistance programs administered by the VA? |

| | o Extremely effective |
|-----------------|--|
| | o Very effective |
| | o Moderately effective |
| | o Slightly effective |
| | o Not at all effective |
| 33. | Did you complete the education or training program? |
| | o Yes(go to q34) |
| | o No(go to q36) |
| 0.4 | |
| 34. | What type of degree or certificate did you receive? Mark (X) ONE box. |
| | o Vocational diploma or certification |
| | o Technical diploma |
| | o Associate's degree (for example: AA, AS) |
| | o Bachelor's degree (for example: BA, BS) |
| | o Master's Degree (for example: MA, MS, MEng, MEd, MSW, MBA) |
| | o Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD) |
| | o Doctorate degree (for example: PhD, EdD) |
| | o Another diploma or certificate |
| | i. Specify: |
| 35. | Did you apply for a job in your education or training field of study; that is, in the area for which |
| | you received training or education? |
| | o Yes, and I am currently employed in my field of study |
| | o Yes, but I am currently employed in a different field |
| | o Yes, but I was unable to find employment |
| | o Other – (please specify) |
| 36. | How many total credit hours did you complete? |
| | o Total credit hours: |
| 27 | Did you take out any loans to complete your education or training program? |
| 37. | o Yes(go to q38) |
| | o No(go to q40) |
| 20 | Did you take out a student loan before or after learning that you are eligible for educational |
| 30. | assistance programs administered by the VA? |
| | o Before |
| | o After |
| | |
| 39. | What are the reasons you took out one or more loans to complete your education or training |
| | program? (Check all reasons that apply). |
| | oyour educational assistance program benefit expired? |
| | oyou transferred your educational assistance program benefit to a dependent? |
| | oyour educational assistance program benefit did not cover the full cost of your |
| | program? oyou did not use your educational assistance program benefit? |
| | |
| | oyou used the loan to cover a dependent's education costs?oother reason? |
| | |
| | o Specify: |
| 40 | What was your employment status prior to enrolling in your education or training |
| - ∪. | program? Were you working full time, part time, or not at all? |
| | o Full time |
| | |
| | |
| | o Part time o Not at all |

41. Which of these describes your total, annual personal income **before** you began an education or training program using educational assistance programs administered by the VA? a. \$0 \$1 to 9.999 h. c. \$10,000 to 24,999 d. \$25.000 to 49.999 e. \$50.000 to 74.999 f. \$75,000 to 99,999 g. \$100,000 to 149,999 h. \$150,000 and greater Prefer not to answer 42. How was your quality of life **before** you began an education or training program using educational assistance programs administered by the VA? a. Very poor b. Poor c. Neither poor nor good d. Good e. Very good 43. How much did you enjoy life **before** you began an education or training program using educational assistance programs administered by the VA? a. Not at all b. A little c. A moderate amount d. Very much e. An extreme amount 44. How satisfied were you with your capacity for work **before** you began an education or training program using educational assistance programs administered by the VA? a. Very dissatisfied b. Dissatisfied c. Neither satisfied nor dissatisfied d. Satisfied e. Very satisfied 45. How satisfied were you with the conditions of your living place before you began an education or training program using educational assistance programs administered by the VA? a. Very dissatisfied b. Dissatisfied c. Neither satisfied nor dissatisfied d. Satisfied e. Very satisfied 46. Which of these describes your **current** total, annual personal income? a. \$0 b. \$1 to 9,999 c. \$10,000 to 24,999 d. \$25,000 to 49,999 e. \$50.000 to 74.999 f. \$75,000 to 99,999 g. \$100,000 to 149,999 h. \$150,000 and greater Prefer not to answer 47. How would you rate your quality of life **now**? a. Very poor b. Poor c. Neither poor nor good d. Good e. Very good 48. How much do you enjoy life now? a. Not at all

- b. A little
- c. A moderate amount
- d. Very much
- e. An extreme amount
- 49. How satisfied are you with your capacity for work **now**?
 - a. Very dissatisfied
 - b. Dissatisfied
 - c. Neither satisfied nor dissatisfied
 - d. Satisfied
 - e. Very satisfied
- 50. How satisfied are you with the conditions of your living place **now**?
 - a. Very dissatisfied
 - b. Dissatisfied
 - c. Neither satisfied nor dissatisfied
 - d. Satisfied
 - e. Very satisfied
- 51. Which of the following best describes your occupation **before** you began an education or training program using educational assistance programs administered by the VA?
 - a. Production Occupations
 - b. Business and Financial Operations Occupations
 - c. Healthcare Support Occupations
 - d. Farming, Fishing, and Forestry Occupations
 - e. Computer and Mathematical Occupations
 - f. Construction and Extraction Occupations
 - g. Management Occupations
 - h. Personal Care and Service Occupations
 - i. Arts, Design, Entertainment, Sports, and Media Occupations
 - j. Community and Social Service Occupations
 - k. Life, Physical, and Social Science Occupations
 - I. Building and Grounds Cleaning and Maintenance Occupations
 - m. Sales and Related Occupations
 - n. Education, Training, and Library Occupations
 - o. Food Preparation and Serving Related Occupations
 - p. Installation and Repair Occupations
 - q. Protective Service Occupations
 - r. Healthcare Practitioners and Technical Occupations
 - s. Office and Administrative Support Occupations
 - t. Architecture and Engineering Occupations
 - u. Legal Occupations
 - v. Transportation and Materials Moving Occupations
 - w. Other
 - i. Please specify
- 52. If you have any additional comments or suggestions related to educational assistance programs administered by the VA, please provide them here.

The Department of Veterans Affairs appreciates your time and feedback.

The Paperwork Reduction Act of 1995: This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 5 minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this survey will lead to improvements in the quality of service delivery by helping to improve primary care services. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.