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## Feedback on the Educational Assistance Programs Administered by the VA

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| 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 be provided to Congress to inform future legislation and budgets. The information will also 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.  **Privacy Act Information**: This survey is used to inform Congressional legislation and budgets to help the VA better serve Veterans with educational assistance. The information gathered from this survey will be maintained and stored in a secure survey platform. VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974. Your response is voluntary. Giving us your information is voluntary. Refusal to provide your information will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide information asked within this survey. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.  **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.  Thank you for your time and for your service! |
| 1. **What is the HIGHEST LEVEL of education and training you have COMPLETED?** Mark (X) for the highest degree received.   No High School Credential   * No High School Credential   HIGH SCHOOL   * High School Diploma * GED * An alternative credential   TRAINING FOR A CAREER, TRADE, OR INDUSTRY   * Vocational/Technical/Non-College Degree (e.g., HVAC repair, truck driving, EMT training, etc.) * VET TEC Program * Flight Training * On-the-Job Training & Apprenticeships (e.g., plumbing, hotel management, firefighting, etc.) * Other Education or Training   1. Specify: ­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_   COLLEGE OR SOME COLLEGE   * Some college credit, no degree * Associate’s degree (for example: AA, AS) * Bachelor’s degree (for example: BA, BS)     AFTER BACHELOR’S DEGREE   * Master’s Degree (for example: MA, MS, MEng, MEd, MSW, MBA) * Professional degree beyond a bachelor’s degree (for example: MD, DDS, DVM, JD) * Doctoral degree (for example: PhD, EdD) |
| 1. What is your sex?    * Male    * Female    * Prefer not to answer |
| 1. What is your age?    * \_\_\_\_\_(years) |
| 1. What is your race? Mark one or more boxes    * American Indian or Alaska Native    * Asian    * Black or African American    * Native Hawaiian or Other Pacific Islander    * White    * Prefer not to answer |
| 1. What is your ethnicity?    * Hispanic or Latino    * Not Hispanic or Latino    * Prefer not to answer |
| 1. What is your current employment status? Are you working full time, part time, or not at all? Mark (X) ONE box.    * Employed, full time    * Employed, part time    * Unemployed    * Not in labor force (e.g., retired, disabled, etc.) |
| 1. What is your military status? (Check all that apply)  * I am a service member / Veteran (go to q8) * I am a dependent / spouse (go to q12) |
| 1. Which branch of the Armed Forces were you sworn into? Check ALL that apply. If more than one is selected, please follow each corresponding follow-on instruction.    * Army …(go to q9)    * Navy …(go to q10)    * Air Force…(go to q11)    * Marine Corps …(go to q8)    * Coast Guard …(go to q10)    * Space Force …(go to q11)    * Army Reserves …(go to q9)    * Navy Reserves …(go to q10)    * Air Force Reserves …(go to q11)    * Marine Corps Reserves …(go to q9)    * Coast Guard Reserves …(go to q10)    * Air National Guard …(go to q11)    * Army National Guard …(go to q9)    * Other      1. (specify)\_\_\_\_\_\_\_\_ …(go to q12) |
| 1. What was your Primary Military Occupational Specialty (MOS) prior to leaving your last service obligation?  * Enter Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ …(go to q12) |
| 1. What was your Primary Rating prior to leaving your last service obligation?  * Enter Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_…(go to q12) |
| 1. What was your Primary Air Force Specialty Code prior to leaving your last service obligation?  * Enter Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_…(go to q12) |
| **The next set of questions are about the educational assistance programs administered by the VA, also sometimes called “GI Bill” benefits, “Post-9/11 GI Bill benefits,” “Montgomery GI Bill Active Duty benefits,” and “Montgomery GI Bill Selected Reserve benefits.” These programs provide financial assistance for education and training to qualifying Veterans and family members.** |
| 1. Did you begin an education or training program using educational assistance programs administered by the VA? Mark (X) ONE box.    * **Yes**, using **my** education entitlement …(go to q13)    * **Yes**, using an education entitlement **transferred to me from a Veteran relative** …(go to q13)    * **Yes**, I am the recipient of a **Fry Scholarship** …(go to q13)    * **No**, I transferred my education entitlement to my dependent …(END of survey)    * **No**, neither I nor my dependents have used a VA education entitlement …(go to q14) |
| 1. Under which GI Bill did you elect your benefits? Check all reasons that apply.    * Post-9/11 GI Bill (Chapter 33)…(go to q15)    * Montgomery GI Bill – Active Duty (Chapter 30) …(go to q15)    * Montgomery GI Bill – Selected Reserve (Chapter 1606)…(go to q15)    * Survivors’ and Dependents’ Educational Assistance (Chapter 35) …(go to q15)    * Post-Vietnam Era Veterans’ Educational Assistance Program (VEAP) (Chapter 32) … (go to 15)    * Reserve Educational Assistance Program (REAP) (Chapter 1607) … (go to 15)    * Do Not Know … (go to q15) |
| 1. 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)    * Health related concerns    * ADA and accessibility concerns    * Financial difficulties    * Illness or death in immediate family    * Family responsibilities    * Ineligible for Educational Assistance Program    * Education or training program was canceled    * Change in employment    * Moved    * Unanticipated active military service, including active duty for training    * Other      1. Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Did you enroll in the education or training program… (Check all reasons that apply)    * To support the transition from military service to a civilian career?    * To gain greater career and job opportunities?    * To continue growth through learning and expand base of knowledge?    * To meet family, peer, or social expectations?    * Because it made pursuing an education accessible and affordable?    * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. What kind of institution provides/provided your education or training? Mark (X) ONE box.    * College/University    * Community/Junior College    * Vocational/Technical/Occupational School    * Other School or School District (Elementary, Junior High, High School, or Adult Learning Center)    * Private Business/Company/Hospital    * Government Agency (Federal, State, Local)    * Professional Association/Organization/Union    * Other      1. Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Are/were you enrolled in the education or training program on a full-time or part-time basis?    * Full time    * Part time |
| 1. Are/were you working as an employee while attending your education or training?    * Yes, employed full-time.    * Yes, employed part-time.    * Not employed during my period of education/training. |
| **The next section will ask about your satisfaction with educational assistance programs administered by the VA.** |
| 1. How likely are you to recommend educational assistance programs administered by the VA to your military peers or others who could potentially qualify for education benefits?    * Highly likely    * Somewhat likely    * Neutral    * Unlikely    * Very unlikely |
| 1. How satisfied are you with the process to get your Certificate of Eligibility from VA?    * Very satisfied    * Satisfied    * Neither satisfied nor dissatisfied    * Dissatisfied    * Very dissatisfied |
| 1. When planning your education or training path, how satisfied were you with the **availability of VA resources**?    * Very Satisfied    * Satisfied    * Neither Satisfied nor Dissatisfied    * Dissatisfied    * Very Dissatisfied |
| 1. Did you interact with a School Certifying Official at your education or training institution?    * Yes …(go to q23)    * No …(go to q24) |
| 1. How satisfied were you with your education or training institution’s School Certifying Official?    * Very Satisfied    * Satisfied    * Neither Satisfied nor Dissatisfied    * Dissatisfied    * Very Dissatisfied |
| 1. When deciding whether or not to use educational assistance programs administered by the VA, did you use any of the services below and if so, how helpful were they for you? (yes or no box and Likert scale next to each option below)    * VA.gov website   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + VA GI Bill Comparison Tool   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + VA Regional Office   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + School Certifying Official (a VA representative at the college or university)   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + Veterans Service Organization (a VA partnership agency that assists service members)   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + Other     - Specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. When deciding **among different possible education and training programs**, did you use… (yes or no box next to each option below)    * VA.gov website   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + VA GI Bill Comparison Tool   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + VA Personalized Career Planning and Guidance program   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + VA WEAMS Institution Search tool   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + Department of Education College Resource Tool   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + Personal or Professional Reference   (Did not use | Very Helpful | Somewhat Helpful | Helpful | Not Helpful)   * + Other     - Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Does/did your educational or training program offer any services or benefits for Veterans?    * Yes …(go to q27)    * No …(go to q28)    * Don’t know …(go to q28) |
| 1. Please describe the services or benefits your educational/training program offered Veterans (e.g., priority registration, academic advising, career counseling, campus VA work study, etc.) |
| 1. 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?    * Yes    * No |
| 1. 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** forvocational training and rehabilitation benefits under Chapter 31 of Title 38, United States Code? Mark (X) ONE box.  * Yes * No   + Do Not Know |
| 1. Did you **use** vocational training and rehabilitation benefits under Chapter 31 of Title 38, United States Code? Mark (X) ONE box.  * Yes * No * Do Not Know |
| 1. 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)?    * Yes …(go to q32)  * No …(go to q36) |
| 1. **Overall**, how effective was the Transition Assistance Program (TAP) in providing you information, resources, and tools to help prepare for the change from military to civilian life?    * Extremely effective    * Very effective    * Moderately effective    * Slightly effective    * Not at all effective |
| 1. How effective was the VA Transition Assistance Program (TAP) at informing you **about your eligibility for** educational assistance programs administered by the VA?    * Extremely effective    * Very effective    * Moderately effective    * Slightly effective    * Not at all effective |
| 1. How effective was the VA Transition Assistance Program (TAP) at informing you **how to apply** for educational assistance programs administered by the VA?    * Extremely effective    * Very effective    * Moderately effective    * Slightly effective    * Not at all effective |
| 1. How effective was the VA Transition Assistance Program (TAP) in guiding you **how to use** educational assistance programs administered by the VA?    * Extremely effective    * Very effective    * Moderately effective    * Slightly effective    * Not at all effective |
| 1. Did you complete the education or training program?    * Yes …(go to q37)    * No …(go to q39) |
| 1. What type of degree or certificate did you receive using your VA education benefits? Mark (X) ONE box.    * Vocational diploma or certification    * Technical diploma    * Associate’s degree (for example: AA, AS)    * Bachelor’s degree (for example: BA, BS)    * Master’s Degree (for example: MA, MS, MEng, MEd, MSW, MBA)    * Professional degree beyond a bachelor’s degree (for example: MD, DDS, DVM, JD)    * Doctorate degree (for example: PhD, EdD)    * Another diploma or certificate    * Specify: ­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_ |
| 1. 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?  * Yes, and I am currently employed in my field of study * Yes, but I am currently employed in a different field * Yes, but I was unable to find employment   + 1. Other – (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. How many total credit hours did you complete?  * Total credit hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. After becoming eligible for education service benefits, did you have to use any personal funds to attain your degree or certification?  * Yes   + No |
| 1. Did you take out any loans to complete your education or training program?  * Yes …(go to q42) * No …(go to q44) |
| 1. Did you take out a student loan **before** or **after** learning that you are eligible for educational assistance programs administered by the VA?  * Before   + After |
| 1. What are the reasons you took out one or more loans to complete your education or training program? (Check all reasons that apply).    * …your educational assistance program benefit expired?    * …you transferred your educational assistance program benefit to a dependent?    * …your educational assistance program benefit did not cover the full cost of your program?    * …you did not use your educational assistance program benefit?    * …you used the loan to cover a dependent’s education costs?    * …other reason?    * Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. 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?    * Full time    * Part time    * Not at all |
| 1. Which of these describes your total, before tax, annual personal income **before** you began an education or training program using educational assistance programs administered by the VA? (Total from **wages/salary** only. Do not include investment income, VA disability compensation, pensions, etc.) 2. $0 3. $1 to 9,999 4. $10,000 to 24,999 5. $25,000 to 49,999 6. $50,000 to 74,999 7. $75,000 to 99,999 8. $100,000 to 149,999 9. $150,000 and greater 10. Prefer not to answer |
| 1. Which of these describes your **current**total, before tax, annual personal income? (Total from **wages/salary** only. Do not include investment income, VA disability compensation, pensions, etc.) 2. $0 3. $1 to 9,999 4. $10,000 to 24,999 5. $25,000 to 49,999 6. $50,000 to 74,999 7. $75,000 to 99,999 8. $100,000 to 149,999 9. $150,000 and greater 10. Prefer not to answer |
| 1. As a result of using your education benefits, would you say your quality of life has: 2. Increased significantly 3. Increased somewhat 4. Not changed 5. Decreased somewhat 6. Decreased significantly |
| 1. As a result of using your education or training program administered by the VA, has your capacity for work now: 2. Increased significantly 3. Increased somewhat 4. Not changed 5. Decreased somewhat 6. Decreased significantly |
| 1. Which of the following best describes your occupation **before** you began an education or training program using educational assistance programs administered by the VA? (Choose all that apply) 2. Military Service 3. Production Occupation 4. Business and Financial Operations Occupation 5. Healthcare Support Occupation 6. Farming, Fishing, and Forestry Occupations 7. Computer and Mathematical Occupation 8. Construction and Extraction Occupation 9. Management Occupation 10. Personal Care and Service Occupation 11. Arts, Design, Entertainment, Sports, and Media Occupation 12. Community and Social Service Occupation 13. Life, Physical, and Social Science Occupation 14. Building and Grounds Cleaning and Maintenance Occupation 15. Sales and Related Occupation 16. Education, Training, and Library Occupation 17. Food Preparation and Serving Related Occupation 18. Installation and Repair Occupation 19. Protective Service Occupation 20. Healthcare Practitioners and Technical Occupation 21. Office and Administrative Support Occupation 22. Architecture and Engineering Occupation 23. Legal Occupation 24. Transportation and Materials Moving Occupation 25. Other 26. Please specify |
| 1. 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.** |