

## Survey for GSA Schedule Holders

**We need to hear from you! The U.S. General Services Administration (GSA) has selected you to participate in a brief survey to gain your perspective and opinions on the agency and its brand. As a GSA Schedule holder, your input is critical to helping us make sure that GSA and its brand remain relevant to stakeholders like you.**

**This survey will only take about five minutes to complete. We would greatly appreciate your honest feedback. Your responses are anonymous and will only be used for this research.**

**Thanks for your time!**

*OMB No: 3090-0297*

*Expires 06/30/2025*

*Paperwork Reduction Act Statement. This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 3090-0297. We estimate that it will take 5 minute/s to read the instructions, gather the facts, and answer the questions. Send only comments relating to our time estimate, including suggestions for reducing this burden, or any other aspects of this collection of information to: General Services Administration, Regulatory Secretariat Division (MVCB), ATTN: Lois Mandell/IC 3090-0297, 1800 F Street, NW, Washington, DC 20405.*

\* 1. Is your business on the GSA Schedule? *Response required.*

Yes

No

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\* 2. How long have you been on the GSA Schedule? *Response required.*

- Less than 6 months
- 6-12 months
- 1-3 years
- 3-5 years
- More than 5 years
- Not sure

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\* 3. How knowledgeable were you about GSA and the services it provides before you became a GSA Schedule holder? *Response required.*

- Not knowledgeable at all
- Slightly knowledgeable
- Moderately knowledgeable
- Very knowledgeable
- Extremely knowledgeable

\* 4. After becoming a GSA Schedule holder, would you say your overall knowledge of GSA, its mission, and the scope of services it offers: *Response required.*

- Increased
- Stayed about the same

\* 5. What impact has being on the GSA Schedule had on your business? *Response required.*

- Very negative
- Somewhat negative
- Neither positive nor negative (neutral)
- Somewhat positive
- Very positive

\* 6. How would you rate your overall opinion of GSA? *Response required.*

- Very negative
- Somewhat negative
- Neither positive nor negative (neutral)
- Somewhat positive
- Very positive

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7. If you said your overall opinion of GSA is "not so favorable" or "not at all favorable," why do you feel this way?





\* 11. What is your opinion of the GSA Advantage! logo, pictured above? *Response required.*

- Very negative
- Somewhat negative
- Neither positive nor negative (neutral)
- Somewhat positive
- Very positive

12. What does the GSA Advantage! logo mean or symbolize to you?

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The logo consists of the characters "18F" in a bold, white, sans-serif font, centered within a solid black square.

\* 13. What is your opinion of the 18F logo, pictured above? *Response required.*

- Very negative
- Somewhat negative
- Neither positive nor negative (neutral)
- Somewhat positive
- Very positive

14. What does the 18F logo mean or symbolize to you?