

## Housing Discrimination Complaint Process Survey

We want to better understand your experience as it relates to the discrimination complaint process.

The survey takes 5 minutes to complete.

Please contact <u>CX@hud.gov</u> with any questions or concerns. This email is to support Customer Experience Feedback only. This mailbox is not for future use or customer support. For direct customer support not related to customer experience feedback, please contact <u>HUD customer service</u>.

OMB Control Number:2511-0001

Expiration Date: 09/30/2024

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The time required to complete this information collection is estimated to average 5 minutes. All responses to this collection of information are voluntary. If you have comments or concerns regarding this collection, please contact CX@hud.gov

→ Required

I trust HUD to address housing discrimination.

Strongly Disagree
O Disagree
Neither Agree nor Disagree
Agree
Strongly Agree

How would you rate your experience with the services received from HUD?

		☆	☆	☆	☆	☆
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→ Required

What factors contributed to your rating? (choose all that apply)

ectiveness of investigation

Clarity of process
Process fairness
Ease of participating in investigation
Time to complete investigation
HUD employees helpfulness
How can we improve your experience? (optional)
How can we improve your experience? (optional)
How can we improve your experience? (optional)

Finish

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