# **FEMA Customer Experience (CX) Survey**

#### **Invitation Email**

Subject line: FEMA Customer Experience Survey

(Programmer Note: Display small logo banner image per DHS/FEMA standards)

Dear [Applicant Name],

FEMA is looking for ways to improve services for disaster survivors and your opinion is very important to us.

This voluntary survey will take 2 to 4 minutes to complete and should be taken by the person in the household who applied for FEMA assistance.

Your answers will not affect the outcome of your application for FEMA assistance.

These questions comply with the Privacy Act of 1974 and have been approved by the Office of Management and Budget under number 1601-0029.

Please click on the start button to read the Paperwork Burden Disclosure Notice, Privacy Act Statement, and begin the survey.

Start Survey Button

Thank you, Federal Emergency Management Agency

If you experience any technical difficulties while completing the survey, please e-mail FEMA-Program-Survey@fema.dhs.gov, include the survey name (Customer Experience Survey), and explain the issue.

FEMA Form: 104-009-FY-21-108

## FEMA Customer Experience (CX) Survey

**Begin Survey Button** 

**OMB Control Number:** 1601-0029 **FEMA Form:** 104-009-FY-21-108

**Expiration:** TBD

### PAPERWORK BURDEN DISCLOSURE NOTICE:

Public reporting burden for this data collection is estimated to average 3 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is voluntary. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472-3100, Paperwork Reduction Project (1601-0029) **NOTE:** Do not send your completed form to this address.

#### PRIVACY ACT STATEMENT

**AUTHORITY**: Government Performance and Results Act of 1993 (Pub. L. 103-62), as amended, and the GPRA Modernization Act of 2010 (Pub. L. 111-352); Executive Order (EO) 12862, "Setting Customer Service Standards"; and its March 23, 1995 Memorandum addendum, "Improving Customer Service"; Executive Order 13411 "Improving Assistance for Disaster Victims"; Executive Order 13571 "Streamlining Service Delivery and Improving Customer Service"; and the related June 13, 2011 Memorandum "Implementing Executive Order 13571 on Streamlining Service Delivery and Improving Customer Service."

**PRINCIPAL PURPOSE(S):** DHS/FEMA collects this information to measure Individual Assistance applicants' customer satisfaction with FEMA services.

**ROUTINE USE(S):** This information is used for the principal purpose noted above. Summary and/or aggregate survey results and analysis may be shared with Congress and the Government Accountability Office; however, no Personally Identifiable Information (PII) will be shared externally. For more information on how DHS may share this data, please see DHS/FEMA/PIA-035 Enterprise Customer Survey System (ECSS), available at https://www.dhs.gov/privacy.

**DISCLOSURE:** The disclosure of information on this form is strictly voluntary and will assist FEMA in making improvements to its Individual Assistance program; failure to provide the information requested will not impact an individual's ability to qualify for or receive FEMA Individual Assistance. Questions regarding this form may be submitted via email to FEMA-Program-Survey@fema.dhs.gov.

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# **FEMA Customer Experience (CX) Survey**

### Introduction

These questions are **about your experience applying for FEMA assistance**. Please use a rating scale of 1 (Strongly Disagree) to 5 (Strongly Agree) to rate the following...

1	Applying f	or EENAA	disactor	accictance	has increased	my truct in	CEVAV
т.	Applying i	OI FEIVIA	uisastei	assistance	nas increaseu	my trust m	FEIVIA.

Strongly Disagre	Strongly Agree			
1	2	3	4	5

2a. What about the FEMA application process made the difference? (Select all that apply.) (Pro	ogrammer note:
Display Q2a if Q1 is "5")	
☐ My need was addressed.	
☐ It was easy to complete what I needed to do.	
☐ It took a reasonable amount of time to do what I needed to do.	
☐ I understand what was being asked of me throughout the process.	
□ I was treated fairly.	
☐ Employees I interacted with were helpful.	
2b. What could have been better about the FEMA application process? (Select all that apply.) ( Display Q2b if Q1 is "4" or below)  My need was not addressed.	(Programmer note:
☐ It was difficult to complete what I needed to do.	
□ It took too long to do what I needed to do.	
☐ I did not understand what was being asked of me throughout the process.	
□ I was not treated fairly.	
☐ Employees I interacted with were not helpful.	
3. Anything else you want us to know about your experience? ( <i>Programmer note: open ended characters</i> )	text box 250

- 4. Your opinion is very valuable to us. May we contact you at a later date to ask additional questions?
  - Yes
  - No

## Closing

Thank you for your time.

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