

JB Charleston EFMP-Family Support Survey

OMB CONTROL NUMBER: 0704-0553

OMB EXPIRATION DATE: 05/31/2025

AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, OMB Control Number: 0704-0553 is estimated to average 1 min per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

To protect user privacy, please do not include any personally identifiable information (PII). PII includes, but is not limited to, information such as email addresses, personal mobile numbers, and social security numbers.

Purpose of the Survey: To identify service gaps and gauge interest in support groups, events, and educational opportunities for members enrolled in the Exceptional Family Member Program.

JB Charleston EFMP-Family Support Survey

1. How many family members are stationed here with you at JB Charleston? _____

2. Please check where you would like to see future M&FRC events/workshops held.

Air Base

Weapons Station

Other:

If you selected "Other" preferred location, please list exactly where? _____

3. Please check how often would you like to see events/workshops offered?

Weekly

Bi-Weekly

Monthly

Bi-Monthly

Quarterly

Bi-Annually

Annually

4. Please check which time frame is best for you or your family to attend events/workshops.

0600-0800 0800-1000 1000-1200 1200-1400 1400-1600 1600-1800

5. Please check which day(s) are best for you or your family to attend events/workshops?
Please select all that apply.

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

JB Charleston EFMP-Family Support Survey

6. What would hinder you or your family from attending events/workshops?
Example: Lack of enclosed, or non-inclusive, play area(s) available.

7. How should the EFMP Family Support Program promote future events/workshops?
Please check all that apply.

Flyer

Facebook

Instagram

JBCMFR Website

Word-of-Mouth

Other

If you selected "Other", please list how you would like to be informed of upcoming events/workshops.

Thank you for your time completing this survey!