DOD Survivor Symposium Feedback Form

Purpose

Military Community and Family Policy would like to request feedback from those who attended the Defense Department's Survivor Symposium, occurring on [Month Day, Year]. The feedback form will determine if the symposium and the information presented further the department's commitment to supporting survivors of active-duty deaths, including by helping survivors understand all benefits and forms of assistance.

We request completion of an online feedback form with the following audience segment:

Attendees of the DOD Survivor Symposium, occurring on [Month Day, Year]

The objectives of the feedback form are to determine:

- Attendee satisfaction with the DOD Survivor Symposium
- Relevance of the information covered in the DOD Survivor SymposiumTopics covered in future DOD Survivor Symposiums

Feedback Form Questions

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DOD Survivor Symposium Feedback Form

The Defense Department thanks you for attending the DOD Survivor Symposium. We value your feedback, which will directly impact future events. Your responses to this survey are voluntary and completely anonymous.

Rate your experience with the DOD Survivor Symposium: (5 stars = very good)

[Star selection]

If you attended the session about the online survivor benefits reports, rate the relevance of the information covered.
[] Completely irrelevant [] Irrelevant [] Relevant [] Very relevant [] Did not attend session
If you attended the session about the Defense Finance Accounting Service and Department of Veterans Affairs updates, rate the relevance of the information covered.
[] Completely irrelevant [] Irrelevant [] Relevant [] Very relevant [] Did not attend session
If you attended the session about financial counseling and how it can benefit survivors, rate the relevance of the information covered.
[] Completely irrelevant [] Irrelevant [] Relevant [] Very relevant [] Did not attend session
If you attended the session about tax implications for deceased military personnel and property tax abatements for surviving spouses, rate the relevance of the information covered.
[] Completely irrelevant [] Irrelevant [] Relevant [] Very relevant [] Did not attend session
How likely are you to recommend the DOD Survivor Symposium to someone else?
[] Very unlikely
[] Unlikely
[] Likely [] Very likely
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How likely are you to attend another DOD Survivor Symposium?
[] Very unlikely [] Unlikely [] Likely [] Very likely
How did you hear about the DOD Survivor Symposium? (Select all that apply)
[] Military OneSource eNewsletter or email [] Military OneSource website [] Facebook [] Friend/family member [] Service provider [] Other (Specify, do not include any personally identifiable information)
Did you experience any of the following issues during the DOD Survivor Symposium? (Select all that apply)
[] Symposium did not meet my needs [] Symposium topics were not presented in a concise format [] No issues occurred [] Other (Specify, do not include any personally identifiable information)
What topics would you like to see covered in a future DOD Survivor Symposium? (Do not include any personally identifiable information in your response, such as full name, email address, home address o other contact information.)
[Open ended, short response]
What is one thing you would change about the DOD Survivor Symposium? (Do not include any personally identifiable information in your response, such as full name, email address, home address o other contact information.)
[Open ended, short response]
What is one thing you gained from attending the DOD Survivor Symposium? (Do not include any personally identifiable information in your response, such as full name, email address, home address o other contact information.)
[Open ended, short response]
What is your connection to the event?

[] Surviving family member
[] Service provider
[] Other (Specify, do not include any personally identifiable information)
[SUBMIT]