

The VA provides free, confidential support 24/7 for Veterans and their family and friends. If you are in crisis, contact the Veterans Crisis Line by dialing 988 (Press 1), or dialing 1 (800) 273-8255 (Press 1), or texting 838255, or visiting <a href="https://www.veteranscrisisline.net">https://www.veteranscrisisline.net</a>. If you are homeless or at risk of homelessness, contact the National Call Center for Homeless Veterans (NCCHV) by dialing 1 (877) 424-3838 or visiting <a href="https://www.va.gov/HOMELESS/">https://www.va.gov/HOMELESS/</a>. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to VACOPaperworkReducAct@va.gov. VA will not disclose your personal information to third parties outside VA without your consent or when immediately responding to an expressed concern or need for immediate information or resources.

OMB Number: 2900-0912 Expiration: 09/30/2025 Estimated Burden: 5 minutes

What best describes you as you're participating in this VA Outreach Event?

Veteran
Active Military/National Guard/ Reserve
Family Member
Caregiver
Survivor

Yes	
O No	
Unsure	
ension, educ	ntly receive VA health care services or VA benefits, such as compensation cation, home loan, or pre-burial benefits?
Yes	
O No	
O	
Unsure	
lease indicate	te why you may not have interacted with VA. Please select all the followin
lease indicates	te why you may not have interacted with VA. Please select all the following apply.
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lease indicate asons that a seasons that a seasons that a seasons I did no	te why you may not have interacted with VA. Please select all the following apply.  displays if answer to previous question is 'Yes' or 'Unsure')  t know I was eligible for VA health care or benefits.  't had the time to look into VA health care or benefits.

	No challenges.
	Event time wasn't convenient.
	Parking was a challenge.
	Location wasn't convenient.
	My disabilities made it hard to attend.
	Making an appointment was difficult.
	Call wasn't conducted at the time I desired.
	Issues with calls (call went too long, too many transfers, too long to be connected to resource provider)
	Technical failures (dropped calls, audio problems)
	Other
lud era	e describe what challenge you had attending the VA Outreach Event. Please do not e any personally identifiable information such as Name, Social Security Number, an ID, or medical information, but do provide details about your challenge.

## It was easy to get the information and/or services that I needed at the VA Outreach Event.

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

# I was able to get my information and/or service support needs met at the VA Outreach Event.

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

## I felt respected and valued during my participation at the VA Outreach Event.

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

## I trust VA to fulfill our country's commitment to Veterans.

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1	2	3	4	5

# I would recommend this VA Outreach Event to other Veterans. Strongly Disagree Disagree Neither Agree nor Disagree Agree Strongly Agree 1 2 3 4 5

What is your sex?	hat is your sex?			
Male				
Female				

Am	erican Indian or Alaska Native		
Asi	an		
Bla	ck or African American		
His	panic or Latino		
Mic	ldle Eastern or North African		
Na	ive Hawaiian or Pacific Island	er	

Enter '00000' if using a	an APO/FPO)
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ve are asking this que events.	stion so that we can help determine the best location for future VEAC

VA Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 2900-0912, and it expires 09/30/2025. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, per year, 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 this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden, to VA Reports Clearance Officer at VACOPaperworkReduAct@va.gov. Please refer to OMB Control No. 2900-0912 in any correspondence. Do not send your completed VA Form to this email address.