



U.S. Department
of Veterans Affairs

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 1 (800) 273-8255 (Press 1), or texting 838255, or visiting <https://www.veteranscrisisline.net>. 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 <https://www.va.gov/HOMELESS/>.

OMB Number: 2900-0876
Expiration: 03/31/2023
Estimated Burden: 5 minutes

Your opinion matters.

In accordance with [Executive Order 14019: Promoting Access to Voting](#), we are asking your input on how VA can best assist Veterans like you in registering to vote. As part of VA’s “whole health” approach to care, we believe that it is part of our duty to Veterans and their families to ensure that you are able to exercise the right to vote that you fought and served to protect.

By learning about how you or your family member can register to vote and any difficulties you may face when registering to vote, we can better design a program that meets the needs of all Veteran voters. Please know that this survey will **NOT** ask you about your party affiliation, your voting history, or your ballot preference. We are only concerned about making sure that you can exercise your right to vote, regardless of who you vote for or when you vote.

For more information on why VA is conducting this survey, please go to [va.gov/vote](#). To learn more about how to vote in your local area, please go to [vote.gov](#).

Please note:

If you are a Non-Veteran family member completing this survey, please ensure you are answering items about **yourself**, not about the Veteran you have a relationship with.

If you are a Non-Veteran family member assisting a Veteran to complete this survey, please ensure all questions are answered on behalf of the Veteran.

Take Our Survey

VA may utilize individual Veteran survey data from this survey or other sources to ensure the final scores truly and accurately represent the experiences of Veterans. This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions and complete this survey. The results of this survey will be used to inform opportunities for program improvement in the quality of VA services. Participation in this survey is voluntary, and your decision not to respond will have no impact on VA benefits or services which you may currently be receiving. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at <https://www.reginfo.gov/public/do/PRAMain>. Information gathered will be kept private to the extent provided by law.



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This survey should take approximately 5 minutes to complete.

1. Are you eligible to vote? Required

- ☐ Yes
- ☐ No
- ☐ Unsure

[Logic: If user selects option “No”, present demographic page.]

2. Are you registered to vote? Required

- ☐ Yes
- ☐ No
- ☐ Unsure

[Logic: If user selects option “No”, present question 4.]

3. When was the last time you confirmed your voter registration? This can include confirming during the voting process. Required

- ☐ Within the last year
- ☐ 1 - 2 years ago
- ☐ 3 - 5 years ago
- ☐ 6 - 10 years ago
- ☐ More than 10 years ago
- ☐ Never

4. When was the last time you changed your permanent residence? Required

- ☐ Within the last year
- ☐ 1 - 2 years ago
- ☐ 3 - 5 years ago
- ☐ 6 - 10 years ago
- ☐ More than 10 years ago
- ☐ Never

5. Have you experienced any challenges while trying to register to vote? Select all that apply. Required

- ☐ I don’t know how to register to vote
- ☐ I don’t know where to register to vote
- ☐ I have difficulties arranging transportation
- ☐ I don’t know where to get information about voter registration
- ☐ I don’t have reliable access to the internet
- ☐ I do not have time to register to vote
- ☐ My disability prevents me from registering to vote
- ☐ It is difficult for me to understand voter registration because English is not my first language
- ☐ I have not experienced any challenges
- ☐ Other challenges

6. Do you want to receive voter registration information from VA? Required

- ☐ Yes
- ☐ No
- ☐ Unsure

Next

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7. What is your relationship to military service? Select all that apply. Required

- ☐ I am a Veteran
- ☐ I am a spouse of a Veteran
- ☐ I am a child/dependent of a Veteran
- ☐ I am a caregiver of a Veteran
- ☐ None of the above

[Logic 1: Present questions 8 and 9 only if user selects "I am a Veteran". Logic 2: If "None of the above" is selected, no other option can be selected.]

8. What is your branch of service? Select all that apply. Required

- ☐ Air Force
- ☐ Army
- ☐ Coast Guard
- ☐ Marine Corps
- ☐ National Guard/Reserves
- ☐ Navy
- ☐ Space Force
- ☐ U.S. Public Health Service Commissioned Corps
- ☐ Prefer not to say

[Logic: If "Prefer not to say" is selected, no other options can be selected.]

9. What is your service era? Select all that apply. Required

- ☐ World War II: 12/07/1941 – 12/31/1946
- ☐ Korean Conflict: 06/27/1950 – 01/31/1955
- ☐ Vietnam Era: 02/28/1961 – 05/07/1975
- ☐ Cold War/Peace Time Era: 1975 – 1991
- ☐ Gulf War Era: 08/02/1990 – 10/06/2001
- ☐ Post 9/11 Era: 10/07/2001 – Present
- ☐ Other

10. What is your location? Required

Select your response

[Logic: Dropdown should include states, territories, overseas option, and other option.]

11. What is your age?

Select your response

Under 20

20 - 29

30 - 39

40 - 49

50 - 59

60 - 69

70 and over

12. What is your gender identity?

- ☐ Male
- ☐ Female
- ☐ Transgender Man
- ☐ Transgender Woman
- ☐ Non-Binary/Third Gender
- ☐ Other
- ☐ Prefer not to say

[Logic: If "Prefer not to say" is selected, no other options can be selected.]

13. What is your Race/Ethnicity? Select all that apply.

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Middle Eastern or North African
- ☐ Other
- ☐ Prefer not to say

[Logic: If "Prefer not to say" is selected, no other options can be selected.]

Finish

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Thank you for choosing VA.

The U.S. Department of Veterans Affairs uses these surveys to collect your feedback in order to continuously improve your experience with VA services.

For more information on registering to vote, please go to [vote.gov](https://www.vote.gov)

Please visit [VA.gov](https://www.va.gov) to explore benefits, resources, and information at VA.

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