



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: 2 Minutes

# Help us serve you better.

We want to hear about your recent call to the ODSBU Contact Center. By indicating how much you agree or disagree with the statements below, you directly help us improve VA services.

This survey should take approximately 2 Minutes to complete.

The customer service representative I interacted with was helpful.

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

The customer service representative took a reasonable amount of time to address my need.

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

The issue that I contacted the ODSBU Contact Center about on [date] was resolved.

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

I am satisfied with the service I received from the ODSBU Contact Center.

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

Can VA contact you about your feedback?

- ☐ Yes, VA can contact me about my experience.
- ☐ No, I do not want VA to contact me about my experience.

Would you like to volunteer your demographic information to help VA better serve you?

- ☐ Yes [\[Logic proceed to Demographics page\]](#)
- ☐ No [\[Logic skip Demographics page\]](#)

Next

<sup>1</sup>We are asking for this information so that you can provide compliments, recommendations, or concerns to VA. <sup>2</sup>By filling out this survey, you are authorizing VA database access to retrieve Veteran contact information to follow up with you accordingly for purposes of service recovery, potential crisis, or to learn more about feedback you have shared regarding your experience with VA. <sup>3</sup>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. <sup>4</sup>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 # 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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# Help VA improve its services.

We are working to better understand our customers. The following questions are voluntary. By providing your data, your responses can help us improve VA care and services. Thank you for your participation.

How would you describe your race? Please select all that apply.

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Middle Eastern or North African
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White

Are you Hispanic or Latino?

- ☐ Yes
- ☐ No

How would you describe your gender?

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

Which sexual orientation do you most identify with? Please select all that apply.

- ☐ Heterosexual or Straight
- ☐ Gay
- ☐ Lesbian
- ☐ Queer
- ☐ Prefer not to say
- ☐ Other

Finish

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[Privacy Policy](#)

If you have additional questions or concerns, please reach out to the Veterans Experience Office.

VA



U.S. Department  
of Veterans Affairs

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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 to improve your experience with VA services.

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

By filling out this survey, you are authorizing VA database access to retrieve Veteran contact information to follow up with you accordingly for purposes of service recovery, potential crisis, or to learn more about feedback you have shared regarding your experience with VA. 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 3 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 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. 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.



EMAIL SUBJECT LINE: OSDBU Contact Center Experience Survey (2 Minutes)

EMAIL PREHEADER: Tell us about your interaction with OSDBU Contact Center



OMB Number: 2900-0876  
Expiration: 03/31/2023  
Burden Time: 2 Minutes

# Your opinion matters

Dear <First Name Last Name>,

We care about your experience with VA. Please take this 2 minute survey to let us know about your interaction on [Month DD, YYYY] with OSDBU Contact Center. The more information you share with us, the better we can serve you.

Take Our Survey

Thank you,

Veterans Experience Office  
Department of Veterans Affairs

Whether you're just getting out of the service or you've been a civilian for years, the [VA Welcome Kit](#) can help guide you to the benefits and services you've earned.

The Veterans Crisis Line provides free, confidential support for Veterans and their families and friends in crisis. Dial 1 (800) 273-8255 (Press 1), or text 838255 to receive confidential support 24/7 (System of Records Notice VA158VA10NC5). Visit <https://www.veteranscrisisline.net> for more information.

Additionally, the National Call Center for Homeless Veterans (NCCHV) provides free, confidential support for Veterans and their family members and friends who are homeless or at risk of homelessness. Veterans can either call or chat online with the National Call Center for Homeless Veterans where trained counselors are ready to talk confidentially 24 hours a day, 7 days a week. Dial 1 (877) 424-3838 or visit <https://www.va.gov/HOMELESS/> to receive confidential support.

Please do not reply to this email - it is unmonitored.

If you wish to share your feedback, please do so by <Month DD, YYYY at TT:TT>.

You received this email because you provided your email address to VA. If you would like to opt out from receiving future surveys, please click below.

[Unsubscribe from this VA Survey](#) | [Privacy Policy](#)

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EMAIL SUBJECT LINE: OSDBU Contact Center Experience Survey (2 Minutes)

EMAIL PREHEADER: We still want to hear about your OSDBU Contact Center interaction



OMB Number: 2900-0876  
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## Your feedback is important to us

Dear John Smith,

VA still wants to hear about your interaction on [Month DD, YYYY] with OSDBU Contact Center. Please let us know how we are doing by taking a 2 minute survey regarding your experience.

Take Our Survey

Thank you,

Veterans Experience Office  
Department of Veterans Affairs

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