



## Trademark Electronic Search System (TESS) Survey

To help us better understand and support your needs, please let us know about your experience using the Trademark Electronic Search System (TESS).

**Overall, how satisfied are you with using Trademark Electronic Search System (TESS) today?**

☐ Very dissatisfied

☐ Dissatisfied

☐ Neither satisfied nor dissatisfied

☐ Satisfied

☐ Very satisfied

Next

OMB Control Number: 0651-0088 • Expiration: 09/30/2025 • Est. time to complete this survey: 4 minutes

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**Please rate your level of agreement with the following statement:**

**I trust USPTO to register trademarks in accordance with U.S. laws and regulations.**

☐ Strongly disagree

☐ Disagree

☐ Neither agree nor disagree

☐ Agree

☐ Strongly agree

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**Which of the following was true about your experience with TESS today?**

**Choose all that apply:**

- ☐ It took too long to do what I needed to do
- ☐ It was hard to do what I needed to do
- ☐ I was able to do what I needed to do
- ☐ I understood what steps I needed to take to do what I needed to do
- ☐ None of the above

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**Which of the following was true about your experience with TESS today?**

**Choose all that apply:**

- ☐ I was able to do what I needed to do
- ☐ It took a reasonable amount of time to do what I needed to do
- ☐ I understood what steps I needed to take to do what I needed to do
- ☐ It was easy to complete what I needed do
- ☐ None of the above

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**Which of the following was true about your experience with TESS today?**

**Choose all that apply:**

- ☐ It was not clear what I needed to do
- ☐ It was hard to do what I needed to do
- ☐ It took too long to do what I needed to do
- ☐ I could not do what I needed to do
- ☐ None of the above

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UNITED STATES  
PATENT AND TRADEMARK OFFICE



**How can we improve your experience when using TESS?**

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### Why were you searching trademarks today?

Choose all that apply:

- ☐ Conducting a clearance search
- ☐ Determining if particular words or phrases are registered trademarks
- ☐ Checking status of my application
- ☐ Maintaining my trademark (e.g., confirming due dates, monitoring appeals)
- ☐ Monitoring for infringement of my trademarks
- ☐ Information about a trademark (e.g., ownership, serial number)
- ☐ Verifying the status of a registered trademark
- ☐ Researching trends in trademark filings
- ☒ Other

***Please describe:***

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### How often do you search using TESS?

- ☐ This is my first interaction
- ☐ Once every 6 months or less often
- ☐ Once every few months
- ☐ Monthly
- ☐ Weekly
- ☐ At least daily

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### What ways have you interacted with trademark resources?

Choose all that apply:

- ☐ Created MyUSPTO.gov account
- ☐ Applied to register a trademark
- ☐ Contacted the Trademark Assistance Center (TAC)
- ☐ Spoken or emailed with a USPTO trademark examining attorney
- ☐ Attended Trademark Basics Boot Camp
- ☐ Watched USPTO trademark videos on YouTube® or www.uspto.gov
- ☐ Attended USPTO online trademark webinars
- ☐ Attended USPTO in-person trademark event
- ☐ None of the above

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**How many trademark application(s) have you submitted to USPTO?**

☐ 1

☐ 2

☐ 3 to 5

☐ 6 to 10

☐ 11 to 49

☐ 50 or more

☐ I have not submitted any trademark applications to USPTO

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Which of the following best describes you?

- ☐ Business owner
- ☐ Entrepreneur
- ☐ Inventor
- ☐ Trademark attorney
- ☐ Patent attorney
- ☐ Paralegal or legal assistant
- ☐ Attorney not specializing in intellectual property
- ☐ Intellectual property agent
- ☐ Marketing or branding professional
- ☐ Artist/designer
- ☐ Researcher
- ☐ Office or administrative support staff
- ☐ Law school clinic student
- ☒ Other

***Please describe:***

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Which of the following best describes your organization?

- ☐ Law firm
- ☐ Small business or startup
- ☐ Business (other than small business)
- ☐ Nonprofit or NGO
- ☐ Primary or secondary (K-12) school
- ☐ College or university
- ☐ U.S. federal government
- ☐ U.S. state, local, tribal, or territorial government
- ☐ Foreign government
- ☐ Individual
- ☒ Other

***Please describe:***

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### What is your organization's legal entity type?

- ☐ Sole proprietorship
- ☐ Limited liability corporation (LLC)
- ☐ Limited liability partnership (LLP)
- ☐ Corporation
- ☐ Other

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Which, if any, of the following describes your organization?

Choose all that apply:

- ☐ American Indian or Alaska Native owned
- ☐ Black or African American owned
- ☐ Disability owned
- ☐ Hispanic or Latino owned
- ☐ LGBTQ owned
- ☐ Located in a historically underutilized business zone (HUBZone)
- ☐ Native Hawaiian or Pacific Islander owned
- ☐ Small disadvantaged business
- ☐ Veteran owned
- ☐ Women owned
- ☒ Other
- ☐ None of the above
- ☐ I would prefer not to answer

Please describe:

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