

Office of Veterans & Military Affairs (OVMA) Veteran Services Feedback Survey

Purpose: This survey gathers feedback from veterans, service members, and families regarding services provided by OVMA.

Responses will help improve programs and accessibility.

Please complete the survey below.

Section 1: General Information

Age: _____

Gender: Male Female Non-binary Prefer not to say

Branch of Service: Army Marines Navy Air Force Space Force Coast Guard

Other: _____ Years of Service: _____

Section 2: Services Used (Select all that apply)

- Healthcare Assistance Mental Health Services Employment Assistance
 Educational Benefits Housing Assistance Claims Assistance
 VA Home Loan Program Assistance ID.me Registration Assistance
 Survivor / Dependent Assistance
 Other: _____

Section 3: Satisfaction Rating (1 = Very Dissatisfied | 5 = Very Satisfied)

Healthcare Assistance: 1 2 3 4 5

Mental Health Services: 1 2 3 4 5

Employment Assistance: 1 2 3 4 5

Educational Benefits: 1 2 3 4 5

Housing Assistance: 1 2 3 4 5

VA Home Loan Assistance: 1 2 3 4 5

ID.me Assistance: 1 2 3 4 5

Claims Assistance: 1 2 3 4 5

Section 4: Feedback & Suggestions

What challenges have you faced in accessing veteran services?

How can OVMA improve services for veterans?

Additional comments or suggestions:

Optional Follow-up

Email Address (optional): _____

Thank you for your service. Your feedback helps improve support for the veteran community.