## CLASSIFICATION:



## Office of Intelligence and Analysis Customer Feedback Form

## Product Title:

All survey responses are completely anonymous. No personally identifiable information is captured unless you voluntarily offer personal or contact information in any of the comment fields. Additionally, your responses are combined with those of many others and summarized in a report to further protect your anonymity.

| 1. Please select partner type: Select One  |                   |                       | and function: Select One   |                          |                      |     |  |  |  |  |  |  |
|--|-------------------|-----------------------|--|--------------------------|----------------------|-----|--|--|--|--|--|--|
| 2. What is the highest level of i  | ntelligence in    | formation that y      | ou receive?  | u receive? Select One    |                      |     |  |  |  |  |  |  |
| 3. Please complete the following sentence: "I focus most of my time on:" Select One  |                   |                       |  |                          |                      |     |  |  |  |  |  |  |
| 4. Please rate your satisfaction with each of the following:   |                   |                       |  |                          |                      |     |  |  |  |  |  |  |
|  | Very<br>Satisfied | Somewhat<br>Satisfied | Neither<br>Satisfied nor<br>Dissatisfied   | Somewhat<br>Dissatisfied | Very<br>Dissatisfied | N/A |  |  |  |  |  |  |
| Product's overall usefulness   | 0                 | 0                     | 0  | 0                        | 0                    | 0   |  |  |  |  |  |  |
| Product's relevance to<br>your mission   | 0                 | 0                     | 0  | 0                        | 0                    | 0   |  |  |  |  |  |  |
| Product's timeliness   | 0                 | 0                     | 0  | 0                        | 0                    | 0   |  |  |  |  |  |  |
| Product's responsiveness to your intelligence needs  | 0                 | 0                     | 0  | 0                        | 0                    | 0   |  |  |  |  |  |  |
| 5. How do you plan to use this product in support of your mission? (Check all that apply.)   |                   |                       |  |                          |                      |     |  |  |  |  |  |  |
| Drive planning and preparedness efforts, training, and/or emergency response operations  |                   |                       | Initiate a law enforcement investigation Intiate your own regional-specific analysis |                          |                      |     |  |  |  |  |  |  |
| Observe, identify, and/or disrupt threats  |                   |                       | Intiate your own topic-specific analysis   |                          |                      |     |  |  |  |  |  |  |
| Share with partners  |                   |                       | Develop long-term homeland security strategies                                       |                          |                      |     |  |  |  |  |  |  |
| Allocate resources (e.g. equipment and personnel)  |                   |                       | Do not plan to use   |                          |                      |     |  |  |  |  |  |  |
| Reprioritize organizational focus   Other:     Author or adjust policies and guidelines  |                   |                       |  |                          |                      |     |  |  |  |  |  |  |
| 6. To further understand your response to question #5, please provide specific details about situations in which you might use this product. |                   |                       |  |                          |                      |     |  |  |  |  |  |  |
|  |                   |                       |  |                          |                      |     |  |  |  |  |  |  |
| 7. What did this product <u>not</u> address that you anticipated it would?   |                   |                       |  |                          |                      |     |  |  |  |  |  |  |

| 8. To what extent do you agree with the following two statements?   |                   |          |                               |          |                      |      |  |  |  |  |  |
|---|-------------------|----------|-------------------------------|----------|----------------------|------|--|--|--|--|--|
|   | Strongly<br>Agree | Agree    | Neither Agree<br>nor Disagree | Disagree | Strongly<br>Disagree | N/A  |  |  |  |  |  |
| This product will enable me to make better decisions regarding this topic.                                  | 0                 | 0        | 0                             | 0        | 0                    | 0    |  |  |  |  |  |
| This product provided me with intelligence information I did not find elsewhere.                            | 0                 | 0        | 0                             | 0        | 0                    | 0    |  |  |  |  |  |
| 9. How did you obtain this product? Select O  | ne                |          |                               |          |                      |      |  |  |  |  |  |
| 10. Would you be willing to participate in a follow-up conversation about your feedback?       Yes          |                   |          |                               |          |                      |      |  |  |  |  |  |
| To help us understand more about your organization so we can better tailor future products, please provide: |                   |          |                               |          |                      |      |  |  |  |  |  |
| Name:   |                   | Position | :                             |          | Sub                  | omit |  |  |  |  |  |
| Organization:   |                   | State    | :                             |          | Feedb                | ack  |  |  |  |  |  |
| Contact Number:   |                   | Email    | :                             |          |                      |      |  |  |  |  |  |
| Privacy Act Statement   |                   |          |                               |          |                      |      |  |  |  |  |  |
|   |                   |          |                               |          |                      |      |  |  |  |  |  |