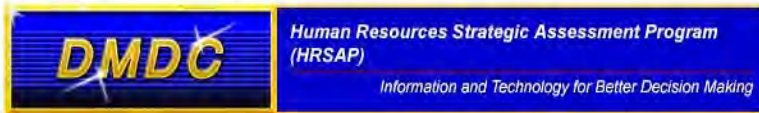


Survey Instrument



- You have reached the redirect page for Department of Defense Human Resources Strategic Assessment Program (HRSAP) surveys. You will be redirected to our contractor's web site (a secure .com site run by Data Recognition Corporation) to participate in the survey.
- Please enter your Ticket Number below, then click the Continue button to access your survey.

- If you are not automatically transferred, click on the link below:

<http://www.dodsurvey.net>

Certification

Authorities: [10 USC 1782](#)
Sponsor: [Office of the Under Secretary of Defense for Personnel and Readiness](#)
Report Control Number: DD-P&R(AR) 2145
Contract: M67004-99-0001
Survey Results: <http://www.dmdc.osd.mil/surveys>

April 2006 Status of Forces Survey of Active-Duty Members

[RCS#DD-P&R\(AR\)2145](#)
[Exp. 05/31/08](#)

Welcome!

Thank you for your participation. You have been selected to take a survey on your attitudes and perceptions of personnel policies. When you click the Continue button below, you will be asked to:

- **Read the Privacy Act Statement.**
- **Answer some questions giving us your attitudes and opinions about military life.**

Thank you, again, for your time and participation.

[Frequently Asked Questions / How to Contact Us](#)

PRIVACY ACT STATEMENT FOR STATUS OF FORCES SURVEYS

In accordance with the Privacy Act, this notice informs you of the purpose of the Status of Forces Surveys and how the findings of these surveys will be used. It also provides information about the Privacy Act and about informed consent. Please read it carefully.

AUTHORITY: 10 United States Code, Sections 136, 1782, and 2358.

PRINCIPAL PURPOSE: Information collected in this survey will be used to report attitudes and perceptions about personnel programs and policies. This information will assist in the formulation of policies which may be needed to improve the working environment. Reports will be provided to the Office of the Secretary of Defense, each Military Department, and the Joint Chiefs of Staff. Findings will be used in reports and testimony provided to Congress. Some findings may be published by the Defense Manpower Data Center (DMDC) or in professional journals, or presented at conferences, symposia, and scientific meetings. In no case will the data be reported or used for identifiable individuals. Briefings and reports on the results from these surveys will be posted on the following Web site:

<http://www.dmdc.osd.mil/surveys/>

ROUTINE USES: None.

DISCLOSURE: Providing information on this survey is voluntary. Most people take 16-30 minutes to complete the survey. There is no penalty or loss of benefits to which you are entitled if you choose not to respond. However, maximum participation is encouraged so that the data will be complete and representative. Your survey responses will be treated as confidential. Identifying information will be used only by government and contractor staff engaged in, and for purposes of, the survey research. For example, the research oversight office of the Office of the Under Secretary of Defense (Personnel and Readiness) and representatives of the U.S. Army Medical Research and Materiel Command are eligible to review research records as a part of their responsibility to protect human subjects in research. This survey is being conducted for research purposes. If you answer any items and indicate distress or being upset, etc., you will not be contacted for follow-up purposes. However, if a direct threat to harm yourself or others is found in survey comments or communications about the survey, DMDC is legally required to forward information about that threat to an office in your area for appropriate action.

SURVEY ELIGIBILITY AND POTENTIAL BENEFITS: DMDC uses well-established, scientific procedures to select a sample that represents the Defense community. This sampling procedure sets up clusters of people based on combinations of demographic characteristics (e.g., location, gender). You were selected at random from one of these clusters of people. This is your chance to be heard on issues that directly affect you. While there is no benefit just for you for your individual participation, your answers on a survey *make a difference*. For example, results from previous surveys have played an important role in deliberations on pay rate adjustments, cost of living and housing allowances, and morale and retention programs.

STATEMENT OF RISK: The data collection procedures are not expected to involve any risk or discomfort to you. The only risk to you is accidental or unintentional disclosure of the data you provide. However, the government and its contractors have a number of policies and procedures to ensure that survey data are safe and protected. For example, no identifying information (name, address, Social Security Number) is ever stored in the same file as answers to survey questions. Answers to survey questions may be shared with organizations doing research on DoD personnel but only after minimizing detailed demographic data (for example, paygrade and detailed location information) that could possibly be used to identify an individual. A confidentiality analysis is performed to reduce the risk of there being a combination of demographic variables that can single out an individual. To further minimize this risk, some variables are randomly set to missing. Government and contractor staff members have been trained to protect client identity and are subject to civil penalties for violating your confidentiality.

SECURITY PROTECTION ADVISORY

WEB SITE PRIVACY: Neither the Department of Defense nor Data Recognition Corporation will collect personal information about you when you visit this Web site unless you choose to provide it yourself. If you supply us with personal information, it will be treated as confidential.

In addition, our system does not enable "cookies," which are files placed on your computer's hard drive in order to monitor your use of the site or the Web. For more information about your privacy rights, please read the Privacy Act Statement at the start of the survey.

This Web site does gather and store certain data from your visit but does not store it in a way that it can be linked to you. This non-personal information helps us make the site more useful by recognizing the types of technology being used. The data collected appear below:

1. The Internet Protocol (IP) address for the computer and the server being used on the Internet (for example, www.compuserve.com, www.aol.com, 122.3.55.34). Depending on your Internet service provider, IP addresses may identify your computer; in other cases, they identify no more than your Internet service provider (such as AOL or Earthlink).
2. The type and version of the browser and operating system used to access our site.
3. The date and time this site was accessed.
4. Number of bytes sent and number received.
5. The pages visited.

This information is stored permanently for troubleshooting technical problems and for future capacity planning. It cannot be linked to any survey response data and resides in a completely different database. It may be shared with DoD as required for troubleshooting connections from DoD computers.

None of this information will be revealed publicly or used to identify you.

HOW TO CONTACT US

If you have questions or concerns about this survey, you have three ways to contact the Survey Operations Center:

- Call 1-800-881-5307
Or
- E-mail us using the following link: ADSurvey@osd.pentagon.mil
Or
- Send us a fax at 1-763-268-3011

FREQUENTLY ASKED QUESTIONS

What is the Status of Forces Survey (SOFS) Program?

- SOFS is a Department of Defense (DoD) personnel survey program that features short, Web-based surveys sponsored by the Under Secretary of Defense for Personnel and Readiness.
- These surveys enable the DoD, on a regular basis, to quickly and accurately gauge the attitudes and opinions of the entire DoD community – active duty or Reserve component members, and DoD civilian employees – on the full range of personnel issues.

Why should I participate?

- This is your chance to be heard on issues that directly affect you.
- Some examples of topics include: quality of life, retention, retirement, and satisfaction.
- Your answers on a survey *make a difference*. For example, results from previous surveys have played an important role in deliberations on pay rate adjustments, cost of living and housing allowances, and morale and retention programs.

How did you pick me?

- We use well-established, scientific procedures to select a sample that represents the Defense community.
- This sampling procedure sets up clusters of people based on combinations of demographic characteristics (e.g., location, gender).
- You were selected at random from one of these clusters of people.

Why am I being asked to use the Web?

- Web administration enables us to get survey results to senior Defense leaders faster.

Why are you using a .net instead of a .mil domain to field your survey?

- The SOFS survey program starts off on a .mil site within DMDC. Next, each person is redirected to a contractor site which uses a .net domain because this makes it as easy as possible for everyone to access the survey, even from a non-government computer. The survey is administered by our contractor, Data Recognition Corporation, an experienced survey operations company.

Do I have to take the survey in one sitting?

- No, it is not necessary to complete the survey in one sitting. Just click the "Save and Return Later" button and the work you completed will be saved.
- When you return to the survey, merely enter your Ticket Number again and this will bring you to the place in the survey where you had stopped.

Why does the survey ask personal questions?

- The Defense Manpower Data Center (DMDC) traditionally reports not only overall results, but also results by location, gender, etc. To complete these analyses, we must ask respondents for this type of demographic information.
- Analyzing results in this way provides Defense leaders information about the attitudes and concerns of all subgroups of personnel (e.g., US/Overseas, males/females) so that no groups are overlooked.
- Sensitive questions are sometimes also asked about topics like personal finances. Such information will be used to improve personnel policies, programs, and practices. As with all questions on the surveys, your responses will be held in confidence.

Will my answers be kept private?

- Your privacy will be safeguarded in accordance with the Privacy Act of 1974 (Public Law 93-579).
- Only group statistics will be reported. Individual data will not be reported.

Will I ever see the results of the survey?

- This survey's briefings and reports will be posted on the following Website:
<http://www.dmdc.osd.mil/surveys/>
- As you complete a survey, there is a section where you can request to be notified by e-mail when results are posted on the Web.

What is DMDC?

- DMDC maintains the largest archive of personnel, manpower, training, and financial data in DoD. It also conducts Joint-Service surveys and operates the Status of Forces Survey Program for the DoD. To learn more, visit the DMDC web site:
<http://www.dmdc.osd.mil/>

How do I know this is an official, approved DoD survey?

- In accordance with DoD Directive 8910.1, all data collection in the Department must be licensed and show that license as a Report Control Symbol (RCS) with an expiration date. The RCS for the SOFS is DD-P&R(AR)2145, expiring 05/31/2008.

What is ADSurvey@osd.pentagon.mil?

- The official e-mail address for communicating with active duty members about Status of Forces Surveys. "ADSurvey" is short for Active-Duty Survey

ELIGIBILITY

1. In what Service were you on active duty on March 27, 2006?

- Army
 Navy
 Marine Corps
 Air Force
 None, you were separated or retired

BACKGROUND INFORMATION

2. Are you . . . ?

- Male
 Female

3. What is your current paygrade? *Mark one.*

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> E-1 | <input checked="" type="checkbox"/> E-6 | <input checked="" type="checkbox"/> W-1 | <input checked="" type="checkbox"/> O-1/O-1E |
| <input checked="" type="checkbox"/> E-2 | <input checked="" type="checkbox"/> E-7 | <input checked="" type="checkbox"/> W-2 | <input checked="" type="checkbox"/> O-2/O-2E |
| <input checked="" type="checkbox"/> E-3 | <input checked="" type="checkbox"/> E-8 | <input checked="" type="checkbox"/> W-3 | <input checked="" type="checkbox"/> O-3/O-3E |
| <input checked="" type="checkbox"/> E-4 | <input checked="" type="checkbox"/> E-9 | <input checked="" type="checkbox"/> W-4 | <input checked="" type="checkbox"/> O-4 |
| <input checked="" type="checkbox"/> E-5 | <input checked="" type="checkbox"/> W-5 | <input checked="" type="checkbox"/> O-5 | |
| | | <input checked="" type="checkbox"/> O-6 or above | |

4. What is your marital status?

- Married
 Separated
 Divorced
 Widowed
 Never married

5. [Ask if Q4 = "Divorced" OR Q4 = "Widowed" OR Q4 = "Never married"] How many years have you been in a relationship with your current significant other (that is, your girlfriend or boyfriend)?

- Does not apply; I do not have a girlfriend/boyfriend
 Less than 1 year
 1 year to less than 6 years
 6 years to less than 10 years
 10 years or more

In the following section, you will be asked question(s) about your spouse's employment status in enough detail to ensure comparability with national employment surveys.

6. [Ask if Q4 = "Married" OR Q4 = "Separated"] Is your spouse currently serving on active duty (not a member of the National Guard or Reserve)?

- Yes
 No

7. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q6 = "No"] Is your spouse currently serving as a member of the National Guard or Reserve in a full-time active-duty program (AGR,FTS,AR)?

- Yes
 No

8. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q6 = "No" AND Q7 = "No"] Is your spouse currently serving as a member of another type of National Guard or Reserve unit (e.g., drilling unit, IMA, IRR)?

- Yes
 No

9. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q6 = "No" AND Q7 = "No"] Last week, did your spouse do any work for pay or profit? *Mark "Yes" even if your spouse worked only one hour, or helped without pay in a family business or farm for 15 hours or more.*

- Yes
 No

10. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q6 = "No" AND Q7 = "No" AND Q9 = "No"] Last week, was your spouse temporarily absent from a job or business?

- Yes, on vacation, temporary illness, labor dispute, etc.
 No

11. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q6 = "No" AND Q7 = "No" AND Q9 = "No" AND Q10 = "No"] Has your spouse been looking for work during the last 4 weeks?

- Yes
 No

12. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q6 = "No" AND Q7 = "No" AND Q9 = "No" AND Q10 = "No" AND Q11 = "Yes"] **Last week, could your spouse have started a job if offered one, or returned to work if recalled?**

- Yes, could have gone to work
- No, because of his/her temporary illness
- No, because of all other reasons (in school, etc.)

13. **What is the highest degree or level of school that you have completed? Mark the one answer that describes the highest grade or degree that you have completed.**

- 12 years or less of school (no diploma)
- High school graduate---traditional diploma
- High school graduate---alternative diploma (home school, GED, etc.)
- Some college credit, but less than 1 year
- 1 or more years of college, no degree
- Associate's degree (e.g., AA, AS)
- Bachelor's degree (e.g., BA, AB, BS)
- Master's, doctoral, or professional school degree (e.g., MA, MS, MEng, MBA, MSW, PhD, MD, JD, DVM)

For the next questions, the definition of "child, children, other legal dependents" includes anyone in your family, except your spouse, who has, or is eligible to have, a Uniformed Services Identification and Privilege card (also called a military ID card) or is eligible for military health care benefits, and is enrolled in the Defense Enrollment Eligibility Reporting System (DEERS).

14. **Do you have a child, children, or other legal dependents based on the definition above?**

- Yes
- No

15. [Ask if Q14 = "Yes"] **How many children or other legal dependents, in each age group, live with you on a regular basis? Mark one answer in each row. To indicate none, select "0". To indicate nine or more, select "9".**

	0	1	2	3	4	5	6	7	8	9
a. Less than 1 year old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. 1 year - under 2 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. 2 - 5 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. 6 - 13 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. 14 - 18 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	0	1	2	3	4	5	6	7	8	9
f. 19 - 22 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. 23 years and older.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. [Ask if Q14 = "Yes"] **How many children or other legal dependents, in each age group, live outside your home on a regular basis? Mark one answer in each row. To indicate none, enter "0". To indicate nine or more, select "9".**

	0	1	2	3	4	5	6	7	8	9
a. Less than 1 year old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. 1 year - under 2 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. 2 - 5 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. 6 - 13 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. 14 - 18 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. 19 - 22 years old.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. 23 years and older.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. **Are you Spanish/Hispanic/Latino?**

- No, not Spanish/Hispanic/Latino
- Yes, Mexican, Mexican-American, Chicano, Puerto Rican, Cuban, or other Spanish/Hispanic/Latino

18. **What is your race? Mark one or more races to indicate what race you consider yourself to be.**

- White
- Black or African American
- American Indian or Alaska Native
- Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese)
- Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)

19. Where is your permanent duty station (homeport) located?

- In one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession
- Europe (e.g., Bosnia-Herzegovina, Germany, Italy, Serbia, United Kingdom)
- Former Soviet Union (e.g., Russia, Tajikistan, Uzbekistan)
- East Asia and Pacific (e.g., Australia, Japan, Korea)
- North Africa, Near East, or South Asia (e.g., Bahrain, Diego Garcia, Kuwait, Saudi Arabia)
- Sub-Saharan Africa (e.g., Kenya, South Africa)
- Western Hemisphere (e.g., Cuba, Honduras, Peru)
- Other or not sure

[Ask if Q19 = "In one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession."] Please select from the list below your permanent duty station location (homeport) within one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession.

[Ask if Q19 = "Other or not sure"] Please enter the name of the country or installation.

20. Where do you live at your permanent duty station?

- Aboard ship
- Barracks/dorm/BEQ/UEPH/BOQ/UOPH military facility
- Military family housing, on base
- Military family housing, off base
- Privatized military housing that you rent on base
- Privatized military housing that you rent off base
- Civilian housing that you own or pay mortgage on
- Civilian housing that you rent
- Other

[Ask if Q20 = "Other"] Please specify where you live at your permanent duty station.

SATISFACTION

21. Taking all things into consideration, how satisfied are you, in general, with each of the following aspects of being in the military?

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
a. Your total compensation (i.e., base pay, allowances, and bonuses).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. The type of work you do in your military job	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Your opportunities for promotion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. The quality of your coworkers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. The quality of your supervisor	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

22. Overall, how satisfied are you with the military way of life?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

RETENTION

23. How many years of active-duty service have you completed (including enlisted, warrant officer, and commissioned officer time)? To indicate less than 1 year, enter "0". To indicate 35 years or more, enter "35".

 Years

24. Suppose that you have to decide whether to stay on active duty. Assuming you could stay, how likely is it that you would choose to do so?

- Very likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Very unlikely

25. [Ask if (Q4 = "Married" OR Q4 = "Separated") OR ((Q4 = "Divorced" OR Q4 = "Widowed" OR Q4 = "Never married") AND (Q5 = "Less than 1 year" OR Q5 = "1 year to less than 6 years" OR Q5 = "6 years to less than 10 years" OR Q5 = "10 years or more"))] **Does your spouse or significant other think you should stay on or leave active duty?**

- Strongly favors staying
- Somewhat favors staying
- Has no opinion one way or the other
- Somewhat favors leaving
- Strongly favors leaving

26. **Does your family think you should stay on or leave active duty?**

- Strongly favors staying
- Somewhat favors staying
- Has no opinion one way or the other
- Somewhat favors leaving
- Strongly favors leaving

27. **How much do you agree or disagree with each of the following statements?**

	Strongly disagree				
	Disagree				
	Neither agree nor disagree				
	Agree				
	Strongly agree				
a. I enjoy serving in the military	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Serving in the military is consistent with my personal goals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. If I left the military, I would feel like I'm starting all over again	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. I would feel guilty if I left the military	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Generally, on a day-to-day basis, I am happy with my life in the military	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. It would be difficult for me to leave the military and give up the benefits that are available in the Service.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Strongly disagree				
	Disagree				
	Neither agree nor disagree				
	Agree				
	Strongly agree				
g. I would not leave the military right now because I have a sense of obligation to the people in it	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. I really feel as if the military's values are my own.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. I would have difficulty finding a job if I left the military.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Generally, on a day-to-day basis, I am proud to be in the military.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. If I left the military, I would feel like I had let my country down.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. I continue to serve in the military because leaving would require considerable sacrifice.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
m. I feel like being a member of the military can help me achieve what I want in life	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
n. One of the problems with leaving the military would be the lack of available alternatives.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
o. I am committed to making the military my career	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

28. **When you leave active duty, how likely is it that you will join a National Guard or Reserve unit?**

- Very likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Very unlikely
- Does not apply, retiring or otherwise ineligible

TEMPO

29. **Have you ever PCSed?**

- Yes
- No

30. [Ask if Q29 = "Yes"] How many months has it been since your last PCS? *To indicate less than 1 month, enter "0". To indicate more than 99 months, enter "99".*

 Months

31. In the past 12 months, how many days have you had to work longer than your normal duty day (i.e., overtime)? *To indicate none, enter "0".*

 Days

32. In the past 12 months, how many nights have you been away from your permanent duty station (homeport) because of your military duties? *To indicate none, enter "0".*

 Nights

33. Have you been deployed in the past 24 months longer than 30 consecutive days?

- Yes
- No

34. [Ask if Q33 = "Yes"] Are you currently on a deployment of 30 days or more?

- Yes
- No

35. [Ask if Q34 = "Yes"] Where are you currently deployed?

- In one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession
- Afghanistan
- Iraq
- Other North African, Near Eastern or South Asian country (e.g., Bahrain, Diego Garcia, Kuwait, Saudi Arabia)
- Europe (e.g., Bosnia-Herzegovina, Germany, Italy, Serbia, United Kingdom)
- Former Soviet Union (e.g., Russia, Tajikistan, Uzbekistan)
- East Asia and Pacific (e.g., Australia, Japan, Korea)
- Sub-Saharan Africa (e.g., Kenya, Liberia, South Africa)
- Western Hemisphere (e.g., Cuba, Honduras, Peru)
- Other or not sure

[Ask if Q35 = "In one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession."] Please select from the list below your deployment location within one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession.

[Ask if Q35 = "Other or not sure"] Please enter the name of the country or installation.

36. In the past 12 months, have you spent more or less time away from your permanent duty station (homeport) than you expected when you first entered the military?

- Much more than expected
- More than expected
- Neither more nor less than expected
- Less than expected
- Much less than expected

37. What impact has time away (or lack thereof) from your permanent duty station (homeport) in the past 12 months had on your military career intentions?

- Greatly increased your desire to stay
- Increased your desire to stay
- Neither increased nor decreased your desire to stay
- Decreased your desire to stay
- Greatly decreased your desire to stay

READINESS

38. Overall, how well prepared are you to perform your wartime job?

- Very well prepared
- Well prepared
- Neither well nor poorly prepared
- Poorly prepared
- Very poorly prepared

39. Overall, how well prepared is your unit to perform its wartime mission?

- Very well prepared
- Well prepared
- Neither well nor poorly prepared
- Poorly prepared
- Very poorly prepared

40. How well has your training prepared you to perform your wartime job?

- Very well
- Well
- Neither well nor poorly
- Poorly
- Very poorly

STRESS

41. Overall, how would you rate the current level of stress in your work life?

- Much less than usual
- Less than usual
- About the same as usual
- More than usual
- Much more than usual

42. Overall, how would you rate the current level of stress in your personal life?

- Much less than usual
- Less than usual
- About the same as usual
- More than usual
- Much more than usual

DEPLOYMENTS SINCE SEPTEMBER 11, 2001

43. Since September 11, 2001, how many times have you been deployed for any of the following operations? *Mark one answer in each row. To indicate none, select "0 times".*

	0 times	1 time	2 times	3 or more times
a. Operation Noble Eagle	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Operation Enduring Freedom	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Operation Iraqi Freedom	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

44. Since August 2005, have you been deployed in support of Joint Task Force Katrina/Rita?

- Yes
- No

45. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] Since September 11, 2001, how many times have you been deployed?

Times

46. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] Since September 11, 2001, were you deployed to any of the following locations? *Mark "Yes" or "No" for each item.*

	Yes	No
a. In one of the 50 states, D.C., Puerto Rico, or a U.S. territory or possession	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Afghanistan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Iraq	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Other North African, Near Eastern or South Asian country (e.g., Bahrain, Diego Garcia, Kuwait, Saudi Arabia)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Europe (e.g., Bosnia-Herzegovina, Germany, Italy, Serbia, United Kingdom)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Former Soviet Union (e.g., Russia, Tajikistan, Uzbekistan)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. East Asia and Pacific (e.g., Australia, Japan, Korea)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sub-Saharan Africa (e.g., Kenya, Liberia, South Africa)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Western Hemisphere (e.g., Cuba, Honduras, Peru)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if Q46 a = "Yes"] Please select from the list below your most recent deployment location within one of the 50 states, D.C., Puerto Rico, a U.S. territory or possession.

[Ask if Q46 j = "Yes"] Please enter the name of the country or installation to which you were most recently deployed since September 11, 2001.

47. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] Since September 11, 2001, what is the total number of days you have been away from your permanent duty station (homeport)?

 Days

48. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] Have you been deployed to a combat zone or an area where you drew imminent danger pay or hostile fire pay since September 11, 2001?

- Yes
 No

49. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND Q48 = "Yes"] How many days have you been deployed to a combat zone since September 11, 2001?

 Days

50. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND Q48 = "Yes"] **For your most recent deployment, how many months have you been or were you deployed to an area where you drew imminent danger pay or hostile fire pay? Include partial months. For example, if you were deployed to a combat zone for 2 days, and those days were in different months, enter "2".**

 Months

51. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] Were you involved in combat operations?

- Yes
 No

52. [Ask if Q34 = "Yes" AND (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND Q48 = "Yes"] Are you currently deployed to a combat zone or an area where you are drawing imminent danger pay or hostile fire pay?

- Yes
 No

53. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] Were any of your deployments since September 11, 2001 longer than you expected?

- Yes
 No

54. Since September 11, 2001, have you been under stop-loss at any time?

- Yes
 No

IMPACT OF DEPLOYMENTS

55. [Ask if Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0"] While you were away during your most recent deployment, to what extent were the following a concern?

	Not a concern				
	Small extent				
	Moderate extent				
	Large extent				
	Very large extent				
a. Spouse's job or education demands.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Managing expenses and bills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Household repairs, yard work, or car maintenance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Loss of income from part-time job.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Safety of your family in their community	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Your feelings of anxiety or depression.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Serious health problems in the family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Serious emotional problems in the family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Difficulties in communications with spouse or family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Not a concern				
	Small extent				
	Moderate extent				
	Large extent				
	Very large extent				
j. Major financial hardship or bankruptcy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Birth or adoption of a child	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Marital problems	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
m. Your feelings of loneliness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
n. Managing child care/child schedules	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
o. Increased need for child care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
p. Had to find child care when it was not previously needed	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
q. Your difficulty sleeping	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

56. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q34 = "No")] After your deployment, to what extent were you likely to...? **Mark one answer in each row.**

	Not a concern				
	Small extent				
	Moderate extent				
	Large extent				
	Very large extent				
a. Be more emotionally distant (e.g., less talkative, less affectionate, less interested in social life)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Appreciate life more	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Get angry faster	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Appreciate your family and friends more	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Drink more alcohol	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Have more confidence in yourself	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Take more risks with your safety	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Be different in another way	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q34 = "No") AND (Q56 h = "Very large extent" OR Q56 h = "Large extent" OR Q56 h = "Moderate extent" OR Q56 h = "Small extent")] **How were you different after your deployment?**

57. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q34 = "No")] **Did you receive support services (e.g., support groups, counseling) after returning home from your most recent deployment?**

- Yes, and it helped
- Yes, but it did not help
- No, I did not want support services
- No, but I wanted support services
- Don't know

58. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q34 = "No")] **Which of the following describes your readjustment to being back at home after your most recent deployment?**

- Very easy
- Easy
- Neither easy nor difficult
- Difficult
- Very difficult

59. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q14 = "Yes" AND (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0 OR Q15 e > 0 OR Q16 a > 0 OR Q16 b > 0 OR Q16 c > 0 OR Q16 d > 0 OR Q16 e > 0))] **In response to your most recent deployment, did your child(ren) experience any of the following behavioral changes? Mark one answer in each row. Where your child(ren)'s behavior did not change, please mark "No change".**

	Don't know			
	Decreased			
	No change			
	Increased			
a. Academic performance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Problem behavior at school	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Problem behavior at home	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Don't know			
	Decreased			
	No change			
	Increased			
d. Pride in having a military parent.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Fear/anxiety	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Independence	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Being responsible	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Closeness to family members.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Closeness to friends	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Distress over discussions of the war in the home, school, or media.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Anger about my military requirements.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Other behavior(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q14 = "Yes" AND (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0 OR Q15 e > 0 OR Q16 a > 0 OR Q16 b > 0 OR Q16 c > 0 OR Q16 d > 0 OR Q16 e > 0)) AND (Q59 l = "Increased" OR Q59 l = "Decreased")]

Please specify what other behavior(s) your child(ren) experienced in response to your most recent deployment.

60. [Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q14 = "Yes" AND (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0 OR Q15 e > 0 OR Q16 a > 0 OR Q16 b > 0 OR Q16 c > 0 OR Q16 d > 0 OR Q16 e > 0))] **How important are the following in your child(ren)'s ability to cope with your deployments? Mark one answer in each row.**

	Not important			
	Somewhat important			
	Moderately important			
	Important			
	Very important			
a. Communications with the deployed parent.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Spouse/guardian support for the deployment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Spouse/guardian ability to maintain a stable household routine	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Not important			
	Somewhat important			
	Moderately important			
	Important			
	Very important			
d. Caregiver/teacher reaction to deployment.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. The way family members deal with the deployment.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Geographic stability during deployment (i.e., no relocations, changes in schools).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Limited exposure to media coverage of the war.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if (Q43 a > "0" OR Q43 b > "0" OR Q43 c > "0" OR Q43 d > "0") AND (Q14 = "Yes" AND (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0 OR Q15 e > 0 OR Q16 a > 0 OR Q16 b > 0 OR Q16 c > 0 OR Q16 d > 0 OR Q16 e > 0)) AND (Q60 h = "Very important" OR Q60 h = "Important" OR Q60 h = "Moderately important" OR Q60 h = "Somewhat important")]

Please specify other important factors that help your child(ren) cope with deployments.

PROGRAMS AND SERVICES

61. **In the past 12 months, have you used Military OneSource (1-800-342-9647) in the following ways to obtain information or services? Mark "Yes" or "No" for each item.**

	No	
	Yes	No
a. Accessed Military OneSource via the Internet	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. E-mailed Military OneSource.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Talked on the telephone with a Military OneSource consultant.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Used Military OneSource to arrange face-to-face counseling session(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

62. [Ask if Q61 a = "No" AND Q61 b = "No" AND Q61 c = "No" AND Q61 d = "No"] **If you have not used Military OneSource (1-800-342-9647) in the past 12 months, what is the primary reason?**

- Not familiar with Military OneSource
- Did not need the services offered
- Concerned about confidentiality
- Thought I could get help elsewhere
- Military OneSource was hard to use
- Other

[Ask if (Q61 a = "No" AND Q61 b = "No" AND Q61 c = "No" AND Q61 d = "No") AND Q62 = "Other"] **Please specify why you have not used Military OneSource in the past 12 months.**

63. [Ask if Q61 a = "Yes" OR Q61 b = "Yes" OR Q61 c = "Yes" OR Q61 d = "Yes"] **How satisfied are you with Military OneSource?**

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

CHILD CARE

64. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0)] **Do you have child(ren) who routinely use child care arrangements so you and your spouse can work?**

- Yes
- No

65. [Ask if (Q4 = "Divorced" OR Q4 = "Widowed" OR Q4 = "Never married") AND (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0)] **Do you have child(ren) who routinely use child care arrangements so you can work?**

- Yes
- No

66. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND (Q64 = "No" OR Q65 = "No")] **Do you need child care arrangements so you (and/or your spouse) can work?**

- Yes
- No

67. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND (Q64 = "Yes" OR Q65 = "Yes")] **During the work day, what is your primary source of child care?**

- On-base child care
- Off-base child care

68. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND (Q64 = "Yes" OR Q65 = "Yes")] **How many of your child(ren) routinely use child care arrangements?**

Children

69. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND Q67 = "On-base child care"] **Indicate the extent you are satisfied with each of the following aspects of on-base child care.**

	Very dissatisfied
	Dissatisfied
	Neither satisfied nor dissatisfied
	Satisfied
	Very satisfied
a. Availability of child care.....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
b. Quality of child care.....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
c. Affordability of child care.....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

70. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND Q67 = "Off-base child care"] **Indicate the extent you are satisfied with each of the following aspects of off-base child care.**

	Very dissatisfied
	Dissatisfied
	Neither satisfied nor dissatisfied
	Satisfied
	Very satisfied
a. Availability of child care.....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
b. Quality of child care.....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
c. Affordability of child care.....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

71. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND (Q64 = "Yes" OR Q65 = "Yes")] **What is the total amount that you spent last month on child care arrangements for your child(ren)? If you didn't spend anything for child care arrangements last month, enter "0".**

 Dollars

72. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0) AND (Q64 = "Yes" OR Q65 = "Yes" OR Q66 = "Yes")] **In the past 12 months, how many days of work have you (and/or your spouse) missed because of lack of child care?**

 Days

SPOUSE EMPLOYMENT

73. [Ask if Q4 = "Married" OR Q4 = "Separated"] **How satisfied are you with your spouse's employment and career opportunities?**

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

74. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q9 = "Yes" OR Q10 = "Yes") AND Q29 = "Yes"] **How long did it take your spouse to find employment after your last PCS?**

- Less than 1 month
- 1 month to less than 4 months
- 4 months to less than 7 months
- 7 months to less than 10 months
- 10 months to less than 12 months
- 1 year or more

75. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q11 = "Yes"] **How many weeks has your spouse been looking for work?**

 Weeks

76. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q6 = "Yes" OR Q7 = "Yes" OR Q9 = "Yes" OR Q10 = "Yes")] **How well do your spouse's qualifications match the work he or she does?**

- He/she is greatly underqualified for the work
- He/she is somewhat underqualified for the work
- His/her qualifications are appropriate for the work
- He/she is somewhat overqualified for the work
- He/she is greatly overqualified for the work

77. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q6 = "Yes" OR Q7 = "Yes" OR Q9 = "Yes" OR Q10 = "Yes")] **How much does your spouse's income contribute toward your total household income?**

- No contribution
- Minor contribution
- Moderate contribution
- Major contribution

78. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q6 = "Yes" OR Q7 = "Yes" OR Q9 = "Yes" OR Q10 = "Yes")] **Does your spouse work less than 35 hours a week?**

- Yes
- No

79. [Ask if Q78 = "Yes"] **Does your spouse want to work a full-time work week of 35 hours or more?**

- Yes
- No

80. [Ask if Q78 = "Yes" AND Q79 = "Yes"] **What is your spouse's main reason for working part-time instead of full-time?**

- Slack work/business conditions
- Could only find part-time work
- Seasonal work
- Child care problems
- Other family/personal obligations
- Health/medical limitations
- School/training/certification
- Other

81. [Ask if Q78 = "Yes" AND Q79 = "No"] What is the main reason your spouse has not been looking for a full-time job?

- Do not want to work full-time
- Child care responsibilities
- Other family/personal obligations
- Health/medical limitations
- Need school/training/certification
- Other

82. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q9 = "Yes" OR Q10 = "Yes")] How did your spouse find his or her current primary job? Mark "Yes" or "No" for each item.

	Yes	No
a. Answered an ad in a newspaper/trade journal.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Answered an Internet ad	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Contacted the employer directly	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Job fair.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Information provided by a friend or relative.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Contact made while doing volunteer work	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Civilian/private employment agency	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Employment assistance program.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. State employment service	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Job bank.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Other.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if (Q4 = "Married" OR Q4 = "Separated") AND (Q9 = "Yes" OR Q10 = "Yes") AND Q82 k = "Yes"] Please specify any other method your spouse used to find his or her current primary job.

83. [Ask if Q4 = "Married" OR Q4 = "Separated"] Regardless of your spouse's current employment status, how important are each of the following reasons for why your spouse works, wants to work, or needs to work?

	Very important	Important	Moderately important	Somewhat important	Not important
a. Need money for basic expenses.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Desire for career	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Want extra money to use now.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Want to save money for the future	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

EDUCATION AND ACCESS TO TECHNOLOGY

84. [Ask if Q4 = "Married" OR Q4 = "Separated"] Is your spouse currently in a civilian school? Mark "Yes" if your spouse was enrolled in the most recent academic semester, enrolled for the following semester, or in between semesters.

- Yes
- No

85. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q84 = "No"] What is the main reason your spouse is not attending school?

- Satisfied with educational level attained
- Hours are not convenient
- Location/transportation problems
- Family responsibilities
- Costs
- Other

86. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q84 = "Yes"] Is your spouse currently a part-time student or full-time student? Part-time is considered an equivalent of less than 12 credit hours per semester.

- Part-time
- Full-time

87. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q84 = "Yes"] What kind of civilian school is your spouse currently enrolled in?

- High School (including public, private, or home schooling)
- GED completion
- Vocational/trade/business or other career training school
- Junior or community college (2-year)
- Four-year college or university
- Graduate/professional school
- Other

[Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q84 = "Yes" AND Q87 = "Other"] Please specify the other civilian school in which your spouse is currently enrolled.

88. [Ask if Q4 = "Married" OR Q4 = "Separated"] What is the highest degree or level of school that your spouse has completed? *Mark the one answer that describes the highest grade or degree that your spouse has completed.*

- 12 years or less of school (no diploma)
- High school graduate---traditional diploma
- High school graduate---alternative diploma (home school, GED, etc.)
- Some college credit, but less than 1 year
- 1 or more years of college, no degree
- Associate's degree (e.g., AA, AS)
- Bachelor's degree (e.g., BA, AB, BS)
- Master's, doctoral, or professional school degree (e.g., MA, MS, MEng, MBA, MSW, PhD, MD, JD, DVM)

89. Do you and/or your family have a home computer?

- Yes
- No

90. Do you have Internet access at home?

- Yes
- No

91. [Ask if (Q15 a > 0 OR Q15 b > 0 OR Q15 c > 0 OR Q15 d > 0 OR Q15 e > 0) AND Q89 = "Yes"] Do(es) your child(ren) use the family computer for homework?

- Yes
- No

92. [Ask if Q89 = "Yes" AND Q90 = "Yes"] Do you use the home computer for online education courses (e.g., online adult/continuing education courses, vocational/technical courses, college-level courses, or graduate school courses)?

- Yes
- No

93. [Ask if (Q4 = "Married" OR Q4 = "Separated") AND Q89 = "Yes" AND Q90 = "Yes"] Does your spouse use the home computer for online education courses (e.g., online adult/continuing education courses, vocational/technical courses, college-level courses, or graduate school courses)?

- Yes
- No

94. How many college credits have you earned since joining the military?

 Credit Hours

95. Have you earned any of the following since joining the military?

- High school diploma
- Alternative diploma (e.g., home school, GED)
- Associate's degree (e.g., AA, AS)
- Bachelor's degree (e.g., BA, AB, BS)
- Master's, doctoral, or professional school degree (e.g., MA, MS, MEng, MBA, MSW, PhD, MD, JD, DVM)
- No, I have not earned a degree since joining the military

COMPENSATION

96. How satisfied are you with each of the following?

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
a. Basic pay	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Military retirement system	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Your medical benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your dental benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

97. Have you received any of the following forms of compensation in the past 12 months? Mark "Yes" or "No" for each item.

	Yes	No
a. Special pay (e.g., incentive, reenlistment, continuation, family separation pay, hazardous duty pay)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Basic Allowance for Subsistence (BAS)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Basic Allowance for Housing (BAH)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Overseas Housing Allowance (OHA)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Cost of Living Allowance (COLA)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

98. [Ask if Q97 a = "Yes"] How satisfied are you with special pay (e.g., incentive, reenlistment, continuation)?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

99. [Ask if Q97 b = "Yes"] How satisfied are you with your Basic Allowance for Subsistence (BAS)?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

100. [Ask if Q97 c = "Yes"] How satisfied are you with your Basic Allowance for Housing (BAH)?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

101. [Ask if Q97 d = "Yes"] How satisfied are you with your Overseas Housing Allowance (OHA)?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

102. [Ask if Q97 e = "Yes"] How satisfied are you with your Cost of Living Allowance (COLA)?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

103. [Ask if Q97 c = "Yes"] To what extent does your Basic Allowance for Housing (BAH) cover your expenses?

- More than covers expenses
- Covers expenses
- Covers basic expenses
- Requires supplement sometimes to cover basic expenses
- Requires supplement all the time to cover basic expenses

104. How important should the following factors be in determining total military compensation, including pay, benefits, and allowances?

	Not important				
	Somewhat important				
	Moderately important				
	Important				
	Very important				
a. Job difficulty	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Job performance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Danger	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Time spent away from home.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Number of hours worked.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Level of responsibility.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Amount of education/training	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Years of experience	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Amount civilian employer would pay for this type of work	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Amount needed to provide for family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Cost of living	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

105. How important do you think the current factors actually are in determining total military compensation, including pay, benefits, and allowances?

	Not important				
	Somewhat important				
	Moderately important				
	Important				
	Very important				
a. Job difficulty	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Job performance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Danger	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Time spent away from home.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Number of hours worked.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Level of responsibility.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Amount of education/training	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Years of experience	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Amount civilian employer would pay for this type of work	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Not important				
	Somewhat important				
	Moderately important				
	Important				
	Very important				
j. Amount needed to provide for family.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Cost of living.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

106. Relative to your high school classmates, how would you rate your opportunities and benefits in the military?

	Much worse than high school classmates				
	Worse than high school classmates				
	Neither better or worse				
	Better than high school classmates				
	Much better than high school classmates				
a. Promotion opportunities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Vacation time.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Education and training.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Total compensation (e.g., pay, bonuses, allowances)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Health care benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Retirement benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

107. [Ask if Q4 = "Married" OR Q4 = "Separated"] Relative to your spouse's high school classmates, how would you rate your spouse's opportunities?

- Much better than high school classmates
- Better than high school classmates
- Neither better or worse
- Worse than high school classmates
- Much worse than high school classmates

FINANCIAL HEALTH

108. During the past 12 months, did you or your spouse receive any income or financial support from the following sources? Mark "Yes" or "No" for each item.

	Yes	No
a. A second job	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Alimony and/or child support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Supplemental Security Income, unemployment, or worker's compensation.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. State-funded child care assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Women, Infants, and Children (WIC), and/or Temporary Assistance for Needy Families (TANF).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Food Stamp Program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Other.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if Q108 g = "Yes"] Please specify the other sources of income or financial support that you or your spouse received in the past 12 months.

109. In today's dollars, how much income do you think you will receive annually from military retirement pay, if you stay in the military for 20 years or more?

 Dollars per Year

110. Assuming there are no medical benefits after you retire, how much do you think you would have to pay in annual medical insurance premiums to get the same level of service that you (and your family) presently receive?

 Dollars per Year

The next questions ask about your income. (Answer only for yourself.)

111. What were your total military gross earnings (i.e., before-tax) in 2005? (Please include all allowances, special pay, basic pay, and bonuses. Exclude spouse earnings.)

You can enter an estimate for 2005 here:

 Dollars

Or, if you prefer, you can enter a range here. My estimated total military earnings in 2005 were at least:

 Dollars

but no more than:

 Dollars

112. In 2005, how much income did you receive from the following sources: a second job; net gains or losses from sale of stocks, bonds, or real estate; interest income; dividends; child support/alimony; social security; welfare assistance; and net rent, trusts, and royalties from any other investments or business? (Exclude spouse earnings.)

You can enter an estimate for 2005 here:

 Dollars

Or if you prefer, enter a range here. My estimated income from other sources in 2005 was at least:

 Dollars

but no more than:

 Dollars

The next few questions ask about income for your spouse.

113. [Ask if Q4 = "Married" OR Q4 = "Separated"] What was your spouse's estimated total yearly gross earnings (i.e., before-tax) in 2005? (Please include bonuses, overtime, and income from a second job.)

You can enter an estimate for 2005 here:

 Dollars

Or, if you prefer, you can enter a range here. My spouse's estimated total gross earnings in 2005 were at least:

 Dollars

but no more than:

 Dollars

114. [Ask if Q4 = "Married" OR Q4 = "Separated"] In 2005, how much income did your spouse receive from the following sources: net gains or losses from sale of stocks, bonds, or real estate; interest income; dividends; child support/alimony; social security; welfare assistance; and net rent, trusts, and royalties from any other investments or business? (Exclude your earnings.)

You can enter an estimate for 2005 here:

 Dollars

Or, if you prefer, you can enter a range here. My spouse's estimated income from other sources in 2005 was at least:

 Dollars

but no more than:

 Dollars

115. Do you own any real estate property including a home?

Yes

No

116. [Ask if Q115 = "Yes"] What is the total amount you paid last month for mortgage(s)? (Include mortgage for primary residence, other residential property debt, lines of credit [home], home improvement loans, and land contracts. Include what was due on a monthly basis; exclude down payments and origination fees. If you do not owe any money for a home, enter "0".)

 Dollars per Month

117. [Ask if Q115 = "Yes"] After the last payment was made on your mortgage(s), what was the estimated total amount you still owed? If you do not owe any money for a home, enter "0".

You can enter an estimate here:

 Dollars

Or, if you prefer, you can enter a range here. The estimated total amount I still owed on my mortgage(s) was at least:

 Dollars

but no more than:

 Dollars

118. [Ask if Q115 = "Yes"] What do you think is the current market value of all real estate that you own?

You can enter an estimate here:

 Dollars

Or, if you prefer, you can enter a range here. The estimated current market value of all real estate that I own is at least:

 Dollars

but no more than:

 Dollars

119. What is the total amount you paid last month for rent? If you do not rent, enter "0".

 Dollars per Month

120. Other than real estate, what is the estimated total value of your financial assets? (Exclude real estate. Include assets jointly held with your spouse, bank accounts, IRAs, money market accounts, Certificates of Deposit [CDs], Savings Bonds, mutual funds, stocks and/or bonds, cash value of life insurance, and managed investment accounts.)

You can enter an estimate for your financial assets here:

 Dollars

Or, if you prefer, you can enter a range here. My estimated total value of financial assets is at least:

 Dollars

but no more than:

 Dollars

121. What is the amount of payments that you made last month to cover personal unsecured debt? (Include all credit cards, debt consolidation loans, AAFES loans, NEXCOM loans, Military Star Accounts, student loans, margin loans, pension loans, installment loans, and other personal loans; exclude home mortgage and car loans.)

 Dollars per Month

122. After the last payment was made on personal unsecured debt, what was the total estimated amount you still owed? (Include all credit cards, debt consolidation loans, AAFES loans, NEXCOM loans, Military Star Accounts, student loans, margin loans, pension loans, installment loans, and other personal loans; exclude home mortgage and car loans.)

You can enter an estimate of personal unsecured debt here:

 Dollars

Or, if you prefer, you can enter a range here. The estimated total amount I still owed was at least:

 Dollars

but no more than:

 Dollars

123. Do you have a credit card for which you carry debt from month to month?

- Yes
- No

124. [Ask if Q123 = "Yes"] What is the annual percentage rate (APR) you are paying on the credit card you use most frequently?

Annual Percent

125. Are you currently making payments on vehicle loans or leases?

- Yes
- No

126. [Ask if Q125 = "Yes"] What is the total amount you paid last month for all vehicle loans and leases (i.e., cars, trucks, or motorcycles)? Include what is due monthly; exclude down payments and origination fees.

Dollars per Month

127. [Ask if Q125 = "Yes" AND Q126 > "0"] What interest rate are you paying on your largest vehicle loan?

Annual Percent

128. [Ask if Q125 = "Yes"] After the last payment was made on your vehicle(s), what was the estimated total amount you still owed? If you do not owe any money for vehicles, enter "0".

You can enter an estimate for total vehicle loans and leases here:

Dollars

Or, if you prefer, you can enter a range here. The total estimated amount I still owed on vehicle loans and leases was at least:

Dollars

but no more than:

Dollars

129. In the past 12 months, did any of the following happen to you (and your spouse)? Mark "Yes" or "No" for each item.

	Yes	No
a. Bounced two or more checks	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Yes	No
b. Failed to make a monthly/minimum payment on credit card, AAFES, NEXCOM account, or Military Star Card account.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Fell behind in paying rent or mortgage	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Was pressured to pay bills by stores, creditors, or bill collectors	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Had telephone, cable, or Internet shut off	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Had water, heat, or electricity shut off	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Had a car, household appliance, or furniture repossessed.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Failed to make a car payment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Filed for personal bankruptcy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Obtained a payday loan from a local lender	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Obtained an Internet payday loan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Obtained an auto title pawn.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
m. Obtained a tax refund anticipation loan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
n. Obtained furniture, electronics, appliances, or computer(s) at a rent-to-buy outlet	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

130. [Ask if Q129 i = "Yes"] Which type of personal (non-business) bankruptcy did you file in the past 12 months?

- Chapter 7 bankruptcy
- Chapter 11 bankruptcy
- Chapter 13 bankruptcy
- Do not know

131. [Ask if Q129 j = "Yes"] In the past 12 months, what is the total amount you have borrowed from local payday lender(s)?

Dollars

132. [Ask if Q129 j = "Yes"] In the past 12 months, how many times have you taken out payday loan(s) from local payday lender(s)?

Times

133. [Ask if Q129 j = "Yes"] How many times did you roll over payday loan(s), obtained from a local lender(s), before closing the loan(s)?

Times

134. [Ask if Q129 j = "Yes"] Was your unit involved in collection action of your payday loan(s) that was obtained from a local lender?

- Yes
- No

135. [Ask if Q129 j = "Yes"] Was disciplinary action taken resulting from delinquent payday loan(s) obtained from local lender(s)?

	Yes	No
a. Non-judicial punishment (e.g., letter of reprimand, article 15, Captain's mast)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Loss of security clearance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Loss of Personnel Reliability Program (PRP) status	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. No longer deployable/returned from deployment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Other.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if Q129 j = "Yes" AND Q135 e = "Yes"] Please specify other disciplinary action taken resulting from delinquent payday loan(s).

136. [Ask if Q129 j = "Yes"] Have you done any of the following to resolve payday loan(s)?

	Yes	No
a. Sought assistance from the relief society.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Sought assistance from the bank or credit union	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Sought assistance from friends and family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Changed the family budget	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Taken another job.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Taken another type of loan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Other.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

137. [Ask if Q129 k = "Yes"] In the past 12 months, what is the total amount you have borrowed from Internet payday lender(s)?

 Dollars

138. [Ask if Q129 k = "Yes"] In the past 12 months, how many times have you taken out payday loan(s) from Internet payday lender(s)?

 Times

139. [Ask if Q129 k = "Yes"] How many times did you roll over Internet payday loan(s) before closing the loan(s)?

 Times

140. [Ask if Q129 k = "Yes"] Was your unit involved in collection action of your Internet payday loan(s)?

- Yes
- No

141. [Ask if Q129 k = "Yes"] Was disciplinary action taken resulting from delinquent Internet payday loan(s)?

	Yes	No
a. Non-judicial punishment (e.g., letter of reprimand, article 15, Captain's mast)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Loss of security clearance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Loss of Personnel Reliability Program (PRP) status	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. No longer deployable/returned from deployment.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if Q129 k = "Yes" AND Q141 e = "Yes"] Please specify other disciplinary action taken resulting from the delinquent Internet payday loan(s).

142. [Ask if Q129 k = "Yes"] Have you done any of the following to resolve Internet payday loan(s)?

	Yes	No
a. Sought assistance from the relief society	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Sought assistance from the bank or credit union	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Sought assistance from friends and family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Changed the family budget.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Taken another job	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Taken another type of loan.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

143. [Ask if Q129 l = "Yes"] In the past 12 months, what is the total amount you have borrowed from auto title lender(s)?

 Dollars

144. [Ask if Q129 I = "Yes"] In the past 12 months, how many times have you taken out auto title pawn(s)?

 Times

145. [Ask if Q129 I = "Yes"] How many times did you roll over auto title pawn(s) before closing the loan(s)?

 Times

146. [Ask if Q129 I = "Yes"] In the past 12 months, was your car repossessed as a result of being delinquent in paying back the auto title pawn(s)?

- Yes
- No

147. [Ask if Q129 I = "Yes"] Was your unit involved in collection action of your auto title pawn(s)?

- Yes
- No

148. [Ask if Q129 I = "Yes"] Was disciplinary action taken resulting from delinquent auto title pawn(s)?

	Yes	No
a. Non-judicial punishment (e.g., letter of reprimand, article 15, Captain's mast)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Loss of security clearance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Loss of Personnel Reliability Program (PRP) status	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. No longer deployable/returned from deployment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Other.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

[Ask if Q129 I = "Yes" AND Q148 e = "Yes"] Please specify disciplinary action taken resulting from delinquent auto title pawn(s).

149. [Ask if Q129 I = "Yes"] Have you done any of the following to resolve auto title pawn(s)?

	Yes	No
a. Sought assistance from the relief society	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Sought assistance from the bank or credit union.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Sought assistance from friends and family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Yes	No
d. Changed the family budget	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Taken another job	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Taken another type of loan.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

150. Which of the following best describes your financial condition?

- Very comfortable and secure
- Able to make ends meet without much difficulty
- Occasionally have some difficulty making ends meet
- Tough to make ends meet but keeping your head above water
- In over your head

151. Which of the following statements comes closest to describing the saving habits of you (and your spouse)?

- Don't save-usually spend more than income
- Don't save-usually spend about as much as income
- Save whatever is left over at the end of the month-no regular plan
- Save income of one family member, spend the other
- Spend regular income, save other income
- Save regularly by putting money aside each month

152. Please indicate whether the following are financial goals for you or your spouse. *Mark one answer in each row.*

	Not applicable			
	No, this is not a goal for us			
	Yes, this is a goal we plan to pursue			
	Yes, this is a goal we are currently working on			
a. Saving for retirement.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Saving for my spouse's education.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Saving for child(ren)'s education.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Saving for a vacation.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Saving for a safety net/emergency fund	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Paying off education-related loans (e.g., Stafford loan, PLUS loan)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Not applicable			
	No, this is not a goal for us			
	Yes, this is a goal we plan to pursue			
	Yes, this is a goal we are currently working on			
g. Being free of credit card debt (e.g., no carry over from month to month).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Being free of debt, except for mortgage.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying a home.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Purchasing furniture/appliances.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Buying a car.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

153. In the past 12 months, have financial problems caused any of the following? *Mark "Yes" or "No" for each item.*

	No	
	Yes	
a. Loss of security clearance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Early return from a deployment or extended temporary duty assignment.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Non-judicial punishment.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Command-directed financial counseling	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Command involvement in resolving unpaid military travel card bills.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Command involvement in resolving other unpaid bills.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

RELATIVES SERVING IN ARMED FORCES

154. Have any of your relatives ever served on active military duty?

	No	
	Yes	
a. Sibling (e.g., brother, sister, half brother, half sister, stepbrother, stepsister).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Parent/guardian (e.g., mother, father, stepmother, stepfather).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Child (e.g., son, daughter, stepchild, adopted child)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

155. Have any of your relatives ever served as a member of the National Guard or Reserve?

	No	
	Yes	
a. Sibling (e.g., brother, sister, half brother, half sister, stepbrother, stepsister).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Parent/guardian (e.g., mother, father, stepmother, stepfather).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	No	
	Yes	
c. Child (e.g., son, daughter, stepchild, adopted child).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

156. [Ask if Q154 a = "Yes" OR Q155 a = "Yes"] How many of your siblings are currently serving on active duty, including National Guard/Reserve members who are activated or deployed or in a full-time, active-duty program (AGR, FTS, AR)? *To indicate none, enter "0".*

Number of Siblings

157. [Ask if Q156 > 0] How many of your siblings are currently deployed to combat zones or areas that qualify for imminent danger pay or hostile fire pay? *To indicate none, enter "0".*

Number of Siblings

158. [Ask if Q154 b = "Yes" OR Q155 b = "Yes"] How many of your parents are currently serving on active duty, including National Guard/Reserve members who are activated or deployed or in a full-time, active-duty program (AGR, FTS, AR)? *To indicate none, enter "0".*

Number of Parents

159. [Ask if Q158 > 0] How many of your parents are currently deployed to combat zones or areas that qualify for imminent danger pay or hostile fire pay? *To indicate none, enter "0".*

Number of Parents

160. [Ask if Q154 c = "Yes" OR Q155 c = "Yes"] How many of your children are currently serving on active duty, including National Guard/Reserve members who are activated or deployed or in a full-time, active-duty program (AGR, FTS, AR)? *To indicate none, enter "0".*

Number of Children

161. [Ask if Q160 > 0] How many of your children are currently deployed to combat zones or areas that qualify for imminent danger pay or hostile fire pay? *To indicate none, enter "0".*

Number of Children

162. [Ask if Q8 = "Yes"] Is your spouse currently activated?

Yes
 No

163. [Ask if Q6 = "Yes" OR Q7 = "Yes" OR Q162 = "Yes"] **Is your spouse currently deployed to a combat zone or an area that qualifies for imminent danger pay or hostile fire pay?**

- Yes
- No

164. **To what extent are you comfortable with simultaneous deployments of family members to combat zones or areas that qualify for imminent danger pay or hostile fire pay?**

- Very large extent
- Large extent
- Moderate extent
- Small extent
- Not at all

RETIREMENT SYSTEM

165. **Which, if any, of the following is your MOST important concern about the military retirement system?**

- No pension benefits are earned unless you serve at least 20 years
- The government does not match any money you put away for retirement in the Thrift Savings Plan
- You cannot transfer your retirement benefits to another employer
- Other
- I have no concerns

[Ask if Q165 = "Other"] **Please specify your MOST important concern about the military retirement system.**

166. [Ask if Q165 = "No pension benefits earned unless you serve at least 20 years" OR Q165 = "The government does not match any money you put away for retirement in the Thrift Savings Plan" OR Q165 = "You cannot transfer your retirement benefits to another employer"] **Which, if any, of the following is your SECOND MOST important concern about the military retirement system?**

- No pension benefits are earned unless you serve at least 20 years
- The government does not match any money you put away for retirement in the Thrift Savings Plan
- You cannot transfer your retirement benefits to another employer
- Other
- I have no other concerns

[Ask if Q166 = "Other"] **Please specify your SECOND MOST important concern about the military retirement system.**

167. **Currently, military personnel do not qualify for retirement benefits unless they serve for at least 20 years. If the system were changed so that you became eligible after at least 10 years of service for a deferred pension payable at age 62, how much influence would this have on your willingness to stay in the military until at least the 10 year point?**

- Does not apply, I have already served 10 years
- Does not apply, I already intend to stay
- Little or no influence
- Some influence
- Moderate influence
- Strong influence

PCS MOVES

168. **Assuming you were NOT going to be deployed in the next 2 years, what would be your preference regarding the time between PCS moves?**

- 2 years longer than the current policy
- 1 year longer than the current policy
- No change in the current policy
- A shorter amount of time than the current policy

169. Assuming you were going to be deployed in the next 2 years, what would be your preference regarding the time between PCS moves?

- 2 years longer than the current policy
- 1 year longer than the current policy
- No change in the current policy
- A shorter amount of time than the current policy

COMMENTS

170. If you have comments or concerns that you were not able to express in answering this survey, please enter them in the space provided.

