

15 MAR 2012



**POST SHORE MANPOWER REQUIREMENTS DETERMINATION PROGRAM**

**STUDY SURVEY**

Command/Activity Title:

Your comments are an integral part of our quality control. In order to maintain this standard of quality, your assistance is needed in assessing the effectiveness of our program and data analysis.

	YES	NO
1. Sufficient information was provided to you and your activity during the pre-brief, to enable personnel to understand the Shore Manpower Requirements Determination Program and the processes used. If No, please explain:		
2. The Shore Manpower Requirements Determination Program study was conducted in a professional customer oriented manner. If No, please explain:		
3. The Shore Manpower Requirements Determination Program team reviewed and audited primary functions performed by the activity. If No, please explain:		
4. Was sufficient time spent by the analyst to understand your department's workload and/or special considerations? If No, please explain:		
5. Do you have any suggestions on how we can improve? If Yes, please explain:		
6. Are there any products or services you need that the SMRDP team does not currently provide? If Yes, please explain:		
7. Is there anything else you would like us to know about your divisions, departments or command? If Yes, please explain:		

Note: Return this Survey to COMNAVRESFOR (N1C1) FAX (COMM) 757-444-7597 or DSN 262-7597