# INSTALLATION MANAGEMENT ACTIVITY-DUI-COLORarmylogovector_black.gif30 Day – Arrival & In-processing Survey New Team Member

**All responses on this survey are used to deliver the best onboarding program for new team members. Your participation is anonymous, names are required for tracking purposes only. Turn this survey in to the Workforce Development Division within 10 business days after your 30th day.**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unsatisfied Satisfied Very Satisfied**

**1 2 3 4 5**

**Please answer/rate the following statements:**

1. Your overall Onboarding experience for the first 30 days. **1 2 3 4 5**

2. Sponsor (maybe same as supervisor) pre-arrival assistance **1 2 3 4 5**

3. Team Member Orientation (8 hour briefing in building 219) **1 2 3 4 5**

4. Onboarding assisted in integrating you into the organization **1 2 3 4 5**

5. Equipment and resources available timely to perform duties **1 2 3 4 5**

5. Understanding of the organizational mission/goals and my role **1 2 3 4 5**

6. Were you assigned a sponsor? Yes No

7. Were you contacted prior to your arrival by your sponsor? Yes No

8. Did you receive a Welcome Letter from your Sponsor? Yes No

9. Did you receive a Welcome Letter from your Supervisor? Yes No

10. Did you receive a Command Welcome Letter? Yes No

11. Were you offered a Welcome Packet? Yes No

* If you received a Welcome Packet, was it helpful? Yes No

12. Did your supervisor review your duty description and

Performance Standards with you (Performance Discussion)? Yes No

13. Service Excellence or Customer Service standards are

incorporated in your Performance Standards? Yes No

14. Received approved annual Performance Plan (standards)? Yes No

15. Have you established an Individual Development Plan? Yes No

16. Have you met your chain of command and director? Yes No

**Please make any additional comments or suggestions on the back of this survey.**

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