

United States Parole Commission
Victim/Witness Questionnaire

**If answering no to any of the below questions, please provide an explanation in the comment section.*

1. Were you informed of the hearing date in a timely manner?

_____ YES _____ NO

2. Was the Hearing Examiner sensitive to your concerns?

_____ YES _____ NO

3. Did you feel safe at the hearing?

_____ YES _____ NO

4. Were you treated fairly during the hearing?

_____ YES _____ NO

5. Was the Victims Program Specialist helpful in addressing your questions or concerns about the hearing?

_____ YES _____ NO

6. What improvements could be made to this process to make it a better experience for victims and witnesses of crime?

7. Comments:

Please return the completed survey to the Victim/Witness staff at the hearing or mail it to the following address. You may also email comments to the Supervisory Victims Coordinator at **USPC.VictimAdv@usdoj.gov**.

**Supervisory Victims Coordinator
United States Parole Commission
5500 Friendship Boulevard, Suite 420
Chevy Chase MD 20815**