U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

Investigator Integrity Questionnaire

Interviewee's Name:	Date of Interview:	Special Investigator's Name:	Subject's Name:		Case Number:	
Investigator's performance in an Please assist us in this quality re	effort to measure their leview by responding to the	and Explosives (ATF). Personnel Secuevel of effectiveness, efficiency, and proeper below questions relating to your receivostage paid, return-addressed envelope	ofessionalism while cond nt interview with the abo	lucting AT	F background inves	tigation.
1. What type of interview was conducted?				In I	Person Telepho	onic
2. If an in person interview, did the Special Investigator contact you in advance to schedule an appointment for the interview?				Yes	No [N/A
3. If a telephonic interview, was it at your request?				Yes	No [N/A
4. Did the Special Investigator inform you that the subject of the investigation has a right under the Privacy Act to obtain a copy of the report of investigation, which would include your name and a summary of your comments?				Yes	No No	
5. Did the Special Investigator identify himself/herself as working on behalf of the Federal Government and provide identification?				Yes	No	
6. Did the Special Investigator	explain the purpose of t	he interview to your satisfaction? (If n	o, please explain)	Yes	No	
7. During the interview, did the interview? (If no, please expl		clear, appropriate questions that related	to the purpose of the	Yes	No No	
8. When asking questions, did	the Special Investigator	allow you to fully respond? (If no, ple	ase explain)	Yes	No	
9. Did the Special Investigator	appear to take notes and	I remain attentive during the interview	? (If no, please explain)	Yes	No No	
10. Did the Special Investigator	maintain a professional	demeanor during the entire interview?	(If no, please explain)	Yes	No	
11. Was the Special Investigator	r neatly dressed, well-gro	pomed, and professional in appearance?	(If no, please explain)	Yes	No No	
12. Was there a need for the Special Investigator to contact you after the initial interview? (If yes, please respond to a. and b. below)				Yes	No No	
a. Number of times re-con	tacted					
b. Reason(s) for the follow	v-up contacts					
		re. If you would care to further discus below so that an ATF representative ma		uestions in	n more detail, please	e
Telephone Number:		E-mail Address	3:			
		Paperwork Reduction Act				

The information requested on this form is in accordance with the Paperwork Reduction Act of 1995. The information collected is used to evaluate the effectiveness, efficiency, and professionalism of ATF Special Investigators while they conduct background investigations. The information provided is voluntary. The estimated average burden associated with this collection of information is 5 minutes per respondent, depending on the individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing it should be addressed to the Report Management Officer, Document Services, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Privacy Act Statement

Solicitation of this information is made pursuant to Executive Orders 19450 and 12968. This information will be used to evaluate the effectiveness, efficiency, and professionlism of ATF Special Investigators who conduct background investigations. The information provided is voluntary and your failure to respond to this solicitation will have no bearing upon the adjudication of the security matter under consideration.