Customer Bill of Rights and Responsibilities

All persons obtaining services from the North Dakota National Guard Service Member and Family Support (SMFS) office are entitled to certain rights and also subject to certain responsibilities. The observance of these rights and responsibilities by both customers and the Service Member and Family Support Office Staff is vital to ensuring that services are delivered in an appropriate and efficient manner.

As Our Customer, You Have the Right to:

- Reasonable and impartial access to services regardless of race, creed, gender, national origin, religion, physical disabilities, rank or sexual orientation.
- Considerate and supportive services with regard for your comprehensive fitness (Mental, Spiritual, Social and Physical.)
- Personal privacy and confidentiality.
- Knowledgeable, competent and cooperative staff.
- Prompt, accurate and reasonable response to your questions and requests.
- Receive applicable and accurate information relevant to assessing your needs.
- Provide feedback on services received.
- Be informed of rights and responsibilities applicable to you as a customer.
- Receive services during the hours of operation as posted on the office entrance.
- File a complaint regarding dissatisfaction of services received.

As Our Customer, It Is Your Responsibility to:

- Provide accurate, complete information and required documentation to support the services requested.
- Communicate updated changes in your status and personal information since your last visit.
- Provide staff member's feedback about your needs and expectations, desired services and satisfaction through the Interactive Customer Evaluation system (I.C.E.)
- Ask questions to ensure you understand instructions and information.
- Disclosure of Personal Identifiable Information is voluntary; however, failure to disclose such information will limit the services we may provide to you.

Statement of Understanding

You can expect the SMFS staff to respect your right to privacy. However, the SMFS staff is not provided complete privileged communication. SMFS staff members are required by law, with or without your consent to contact proper authorities if:

- 1.) Staff believes you intend to harm yourself or others and/or;
- 2.) If a family member is suspected of maltreatment, molestation, child neglect or drug use.

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC, 301 and 552, 28 USC 1746, 44 USC 3101, and EO 9397 (SSN).

PRINCIPAL PURPOSES: This form is used by military personnel and Department of Defense civilian and contractor personnel, collectively referred to as civilians, when applicable. For all personnel it is used to collect data to determine eligibility for programs and services offered under CNGBI 1800.02

The purpose of soliciting the SSN is to provide positive identification. All items may not be applicable.

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ROUTINE USES: Information collected on this form will help family program staff in assessing and fulfilling needs.

DISCLOSURE: Voluntary; however, failure to provide accurate personal identifier information and other solicited information will limit the services provided.

A copy of this document is available upon request.