

Instructions - Check list

Please complete each step as applicable. Note: you are only completing for one product type: Form, Content, Search OR Edge Cases.

Make a copy of this template, save with your product's name, and upload with your KPI Request Form.

<input checked="" type="checkbox"/>	Form Products Only: fill out the information on "Form Product Details" tab
<input type="checkbox"/>	Content Products Only: fill out the information on the "Content Product Details" tab
<input type="checkbox"/>	Search Product Only: fill out the information on the "Search Product Details" tab
<input type="checkbox"/>	Edge Cases Only: fill out the information on the "Form Product Details" AND "Content Product Details" tabs

Product Information

Please provide the following details about your product (all information is required). Notes are included to assist as needed.

Product Name: [1]	GH Issue tickets
Parent Form Name: [2]	
Form Name: [3]	
Description: [4]	
Product Type:	Form
Version #:	
Launch Date	

Form Funnel Details

Please provide your Form's landing page url, each step/page name and url in your funnel (you are only required to complete as many steps as applicable to your product)

Step	Step/Page Name	Page URL	Step is optional
0	Landing Page [5]	[6]	<input type="checkbox"/>
1	[7]		<input type="checkbox"/>
2	[8]		<input type="checkbox"/>
3			<input type="checkbox"/>
4			<input type="checkbox"/>
5			<input type="checkbox"/>
6			<input type="checkbox"/>
7			<input type="checkbox"/>
8			<input type="checkbox"/>
9			<input type="checkbox"/>
10			<input type="checkbox"/>
11			<input type="checkbox"/>
12			<input type="checkbox"/>
13			<input type="checkbox"/>
14			<input type="checkbox"/>
15			<input type="checkbox"/>
16			<input type="checkbox"/>
17			<input type="checkbox"/>
18			<input type="checkbox"/>
19			<input type="checkbox"/>
20			<input type="checkbox"/>

Product Information

Please provide the following details about your product (all information is required). Notes are included to assist as needed.

Product Name: [13]			
Parent Form Name: [14]			
Form Name: [15]			
Description: [16]			
Product Type:	Search		
Version #:			
Launch Date			

[1] Example: Health Care Application

[2] Example: 10-7959f-2

[3] Example:
10-7959f-2 - Foreign Medical Program Claim Cover Sheet

[4] Example: Foreign Medical Program Claim Cover Sheet

[5] The landing page is the "front door" to your form. In the ideal user journey what page would the user view immediately before starting step 1.

[6] Example: www.va.gov/health-care/how-to-apply/

[7] Example: Intro page

[8] Example: User details page

[9] Example: Health Care Application

[10] Example: 10-7959f-2

[11] Example:
10-7959f-2 - Foreign Medical Program Claim Cover Sheet

[12] Example: Foreign Medical Program Claim Cover Sheet

[13] Example: Health Care Application

[14] Example: 10-7959f-2

[15] Example: 10-7959f-2 - Foreign Medical Program Claim Cover Sheet

[16] Example: Foreign Medical Program Claim Cover Sheet