## **Customer Satisfaction Form**

We would like to know how well our programming meets your needs. Please complete this brief survey, as your responses will help us better serve the community.

|         | Overall, how satisfied are you with our services? Very satisfiedSatisfiedNeutralDissatisfiedVery dissatisfied   |                |                  |                       |                   |  |
|---------|---|----------------|------------------|-----------------------|-------------------|--|
| 2.      | Did you learn at least one helpful practice that you will use? Yes No N/A   |                |                  |                       |                   |  |
| 3.      | Will any of the information provided help you:  Save you time Save you money Increase the value of your home Improve your health Other (please explain) |                |                  |                       |                   |  |
| 4.      | Would you recommend the Extension Service to friends or colleagues?  Definitely Probably Not sure Probably not Definitely not                           |                |                  |                       |                   |  |
|         | How did you hear about our services?  Flyer/Poster Newsletter Friend/Family TV Radio Newspaper Other, please specify                                    |                |                  |                       |                   |  |
| 6.<br>「 | Please rate the follo   | owing aspec    | ts of our        | services              | :                 |  |
| J.      |   | Evcellent      | Good             | Fair                  | <u> </u>          |  |
| J.      | Registration process  | Excellent<br>4 | Good             | Fair<br>2             | Poor              |  |
|         | Registration process Cost   | Excellent 4    | Good<br>3        | Fair<br>2             | <u> </u>          |  |
|         | Cost  | 4              | 3                | 2                     | Poor 1            |  |
|         |   | 4              | 3                | 2                     | Poor 1 1          |  |
|         | Cost Time/Schedule Subject  | 4 4 4          | 3<br>3<br>3      | 2 2 2 2               | Poor 1 1 1 1      |  |
|         | Cost Time/Schedule  | 4 4 4          | 3 3 3            | 2 2 2                 | Poor 1 1 1 1      |  |
|         | Cost Time/Schedule Subject Staff  | 4 4 4 4        | 3<br>3<br>3<br>3 | 2<br>2<br>2<br>2<br>2 | Poor  1 1 1 1 1 1 |  |

\*Please see other side.

Phone: \_\_\_\_\_ Email: \_\_\_\_

Please use the space below if you have a positive testimonial or accolade that you would be willing for us to share.

## Your feedback is important to us. Thank you for your time!

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Please return completed form to: Customer Satisfaction Survey 3309 Burlington Rd., Greensboro, NC 27405



North Carolina A&T State University and North Carolina State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University, North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.