

Customer Satisfaction Survey

We want to meet your needs. We need your feedback to tell us how we are doing. Please take a few minutes to answer the following questions and return to the receptionist or case worker.

1. I am a (*please check one*): Custodial Parent Non-Custodial Parent Relative Other

Please use this scale to rate our performance

5 – Strongly Agree 4 – Agree 3 – Neutral 2 – Disagree 1 – Strongly Disagree

- | | | | | | |
|--|---|---|---|---|---|
| 2. I was greeted by the receptionist in a prompt and courteous manner. | 5 | 4 | 3 | 2 | 1 |
| 3. The waiting area was neat and clean. | 5 | 4 | 3 | 2 | 1 |
| 4. The person assisting me was knowledgeable and informative. | 5 | 4 | 3 | 2 | 1 |
| 5. I was treated with courtesy and respect. | 5 | 4 | 3 | 2 | 1 |
| 6. I accomplished what I set out to accomplish with my visit. | 5 | 4 | 3 | 2 | 1 |

Please mark Yes or No for the following question.

7. I waited longer than 15 minutes to be seen. Yes No

Additional Information to Help Us

8. What was the purpose of your visit today?

Please provide any suggestions or comments that would help us serve you better.

Date: _____

Name (*Optional*): _____ Contact Phone: _____

<p>Save a trip to the office – Did you Know?</p> <p>The following is available via the Internet at des.az.gov (click on Child Support Enforcement)</p> <p>Case Status, Make a Payment, Forms, Pay History, Frequently Asked Questions</p>
