Customer Feedback Survey

NAME: _____ **DEPARTMENT:** _____

JOB TITLE: _____ **DATE** _____

INSTRUCTIONS

For each question, respondents should select a level of agreement on a scale from 1 (Strongly Disagree) to 5 (Strongly Agree)

1. The team was responsive to my needs and inquiries.

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

2. The quality of the service or product met or exceeded my expectations.

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

3. The team demonstrated professionalism and courtesy throughout our interaction.

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

4. Communication was clear, timely, and effective.

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

5. Any issues or concerns I raised were addressed promptly and to my satisfaction.

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

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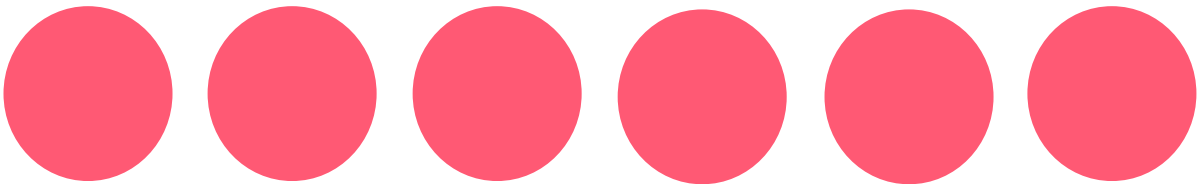

6. The team demonstrated a deep understanding of my needs and requirements.

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

7. I would recommend our team's services to others.

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

8. The team consistently delivers on promises and commitments..

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

9. The team actively seeks customer feedback to improve their services.

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

10. Please provide any suggestions or comments to help us better serve you: