**Customer Satisfaction Survey**

**Section 1: General Information**

1. How did you hear about our company?
	* Website
	* Social Media
	* Referral
	* Advertisement
	* Other (please specify): \_\_\_\_\_\_\_\_\_\_
2. How often do you use our services?
	* First time
	* Occasionally (1-2 times a year)
	* Regularly (3-6 times a year)
	* Frequently (more than 6 times a year)

**Section 2: Service Experience**

1. On a scale of 1 to 5, how satisfied are you with our overall service? (1 = Very Dissatisfied, 5 = Very Satisfied)
	* 1
	* 2
	* 3
	* 4
	* 5
2. How would you rate the quality of the customer service you received?
	* Excellent
	* Good
	* Average
	* Poor
	* Very Poor
3. How quickly was your issue resolved?
	* Very Quickly
	* Quickly
	* Average
	* Slowly
	* Very Slowly
4. How clear and understandable was the information provided by our representative?
	* Very Clear
	* Clear
	* Neutral
	* Unclear
	* Very Unclear
5. How likely are you to recommend our services to others? (0 = Not at all likely, 10 = Extremely likely)
	* 0 1 2 3 4 5 6 7 8 9 10

**Section 3: Detailed Feedback**

1. What did you like most about your experience with us? (Open-ended)
2. What can we do to improve our service? (Open-ended)
3. Any additional comments or suggestions? (Open-ended)

**Conclusion:**

Thank you for your feedback! We appreciate your time and effort in helping us improve our services. If you have any immediate concerns, please feel free to contact us directly at [contact information].

**Customer Feedback Collection Form**

**Introduction:**

We value your feedback and would like to know more about your recent experience with our company. Please take a few moments to fill out this form.

**Personal Information:**

* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Date of Service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Feedback Questions:**

1. How would you rate your overall experience?
	* Excellent
	* Good
	* Average
	* Poor
2. Were our representatives courteous and helpful?
	* Yes
	* No
3. Did you find the resolution satisfactory?
	* Yes
	* No
4. Please provide any additional comments or suggestions:

**Thank You:**

Thank you for providing your feedback. Your insights are invaluable to us, and we look forward to serving you better in the future.

**Customer Feedback Questionnaire**

**Introduction:**

Your feedback is important to us. Please complete this questionnaire to help us understand your experience with our services.

**Questions:**

1. How would you rate the ease of contacting our customer service?
	* Very Easy
	* Easy
	* Neutral
	* Difficult
	* Very Difficult
2. Did our customer service representative address your issue adequately?
	* Yes
	* No
3. On a scale of 1 to 5, how knowledgeable was our representative? (1 = Not knowledgeable, 5 = Very knowledgeable)
	* 1
	* 2
	* 3
	* 4
	* 5
4. How satisfied are you with the time it took to resolve your issue? (1 = Very Dissatisfied, 5 = Very Satisfied)
	* 1
	* 2
	* 3
	* 4
	* 5
5. Please provide any additional feedback or suggestions:

**Conclusion:**

Thank you for your feedback. We appreciate your time and look forward to improving our services based on your valuable insights.