

Program: \_\_\_\_\_ Date & Time: \_\_\_\_\_  
Instructor/Staff: \_\_\_\_\_ Location: \_\_\_\_\_

## Chandler Parks and Recreation Division Customer Satisfaction Survey

We are dedicated to providing the finest services to you. Our primary goal is your satisfaction! Your opinion about our services is very important. Please help us serve you better by answering the following questions.:

1. How would you rate our registration process (if applicable):

Excellent     Good     Satisfactory     Needs Improvement

If "Needs Improvement," explain: \_\_\_\_\_

2. Did the program/event meet your expectations?

Excellent     Good     Satisfactory     Needs Improvement

If "Needs Improvement," explain: \_\_\_\_\_

3. Did the instructor/staff display professional and enthusiastic behavior?

Excellent     Good     Satisfactory     Needs Improvement

If "Needs Improvement," explain: \_\_\_\_\_

4. Was the staff courteous, knowledgeable, and responsive?

Excellent     Good     Satisfactory     Needs Improvement

If "Needs Improvement," explain: \_\_\_\_\_

5. How would you rate the condition of the facility/park and equipment?

Excellent     Good     Satisfactory     Needs Improvement

If "Needs Improvement," explain: \_\_\_\_\_

6. What did you like most about this program/class/instructor/event?

\_\_\_\_\_  
\_\_\_\_\_

7. Do you have suggestions that might help the program/class/instructor/event improve?

\_\_\_\_\_  
\_\_\_\_\_

8. Overall Customer Satisfaction

Excellent     Good     Satisfactory     Needs Improvement

If "Needs Improvement," explain: \_\_\_\_\_

9. How did you learn about the activities offered through Parks and Recreation? (Check as many as apply.)

Break Time     Cable TV (*Come Out and Play, Chandler!*)     Program Flyer

Word of mouth     Newspaper     Other: \_\_\_\_\_

10. Do you have any other comments about our programs, events, services, and performance?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Thank you very much for your time!**