

HempsteadWorks
Career Workshop Series
Customer Satisfaction Survey

Last Name: _____ First-Mi: _____

Email: _____

Date: ____/____/____

For each of the statements below indicate the degree to which you agree with that statement using the number **4** to indicate you strongly agree, **3** to indicate you agree, **2** to indicate a low level of agreement, and **1** to indicate no agreement at all.

A. The subject matter presented was helpful and relevant to my needs. 1-4 [____]

B. The facilitator presented the subject matter in a clear and organized fashion. 1-4 [____]

C. The written material presented was helpful and relevant to my needs. *1-4 [____]

*If no written material provided enter "NA"

Customer Comments:

Staff Use Only:

Funding Code: _____ (I.E. WIOA; DEI; etc.)

Activity Code: _____

Instructor: _____ Date: _____