



FACILITIES SERVICES

Customer Feedback Form

How are we doing? We want your feedback...the good and the bad! By completing this customer service survey we can provide better services to you, our customers. If you have conducted business with the Facilities Department, please tell us what you think. Suggestions are welcome. Including your name and telephone, is of course optional, but helpful. You may email these to the Facilities Office.

Facilities Office: Emergency Response, Key System, Signage, Vehicle Rentals, Work Order Requests

With 5 being the highest, rank the service you received.

Timeliness of service after request was made:

1 2 3 4 5 No Opinion

Quality of workmanship:

1 2 3 4 5 No Opinion

Professionalism and courteousness of Facilities Office personnel:

1 2 3 4 5 No Opinion

Overall level of satisfaction:

1 2 3 4 5 No Opinion

Other comments:

Building Services: Carpentry, Electrical, General Repair, HVAC, Locksmith, Painting, Parking Lots, Plumbing, Welding

Timeliness of service after request was made:

1 2 3 4 5 No Opinion

Quality of workmanship:

1 2 3 4 5 No Opinion

Professionalism and courteousness of Building Services personnel:

1 2 3 4 5 No Opinion

Condition of work area when service was completed:

1 2 3 4 5 No Opinion

Overall level of satisfaction:

1 2 3 4 5 No Opinion

Other comments:

Grounds Services: Athletic Fields, Concrete and Masonry, General Cleanup, Irrigation, Landscape, Tree Trimming

Timeliness of service after request was made:

1 2 3 4 5 No Opinion

Quality of workmanship:

1 2 3 4 5 No Opinion

Professionalism and courteousness of Grounds personnel:

1 2 3 4 5 No Opinion

Condition of work area when service was completed:

1 2 3 4 5 No Opinion

Overall level of satisfaction:

1 2 3 4 5 No Opinion

Other comments:

Custodial Services: Cleaning, Event Setup, Moving Services, Pest Control, Providing Needed Supplies

Timeliness of service after request was made:

1 2 3 4 5 No Opinion

Quality of workmanship:

1 2 3 4 5 No Opinion

Professionalism and courteousness of Custodial personnel:

1 2 3 4 5 No Opinion

Condition of work area when service was completed:

1 2 3 4 5 No Opinion

Overall level of satisfaction:

1 2 3 4 5 No Opinion

Other comments:

Environmental Health & Safety: Ergonomics, Disposing of Hazardous Waste/Biohazard, Safety Issues

Timeliness of service after request was made:

1 2 3 4 5 No Opinion

Quality of workmanship:

1 2 3 4 5 No Opinion

Professionalism and courteousness of EHS personnel:

1 2 3 4 5 No Opinion

Overall level of satisfaction:

1 2 3 4 5 No Opinion

Other comments:

Optional Information:

Name: _____ E-mail: _____

Building: _____ Room: _____ Phone: _____ Date: _____

Do you wish to be contacted? Yes No

Thank you for your time, consideration, and help in determining where we need to concentrate and improve our efforts and services.