



COMMISSION ON REHABILITATION SERVICES CUSTOMER SATISFACTION SURVEY LARGE PRINT VERSION

State Form 49823 (R / 5-05) / VRS 0007A

The information on this form is **CONFIDENTIAL** per 1998 Amendments of the Rehabilitation Act of 1973

INSTRUCTIONS AND OPTIONS

Vocational Rehabilitation (VR) would like to improve its services. You can help us by letting us know how we are doing. Please take a few minutes to answer the questions on the next three pages.

You may have concerns and want to talk to someone about your services or job. If you do, check the box OR call the toll-free telephone number by the person you would like to see on page 3. If you have things to say about your services or how services could be improved, please write them on page 4.

You have two choices:

Choice One: Answer the survey in the VR office. Put the survey in the pre-addressed and pre-stamped envelope. Give it to the receptionist or secretary and it will be mailed for you.

Choice Two: Take the survey home to answer. Use the pre-addressed and pre-stamped envelope to mail it.

Please feel free to ask questions about the survey while you are at the VR office. Thank you very much for your help.

COMMISSION ON REHABILITATION SERVICES CUSTOMER SATISFACTION SURVEY

Circle the answer to the right which <u>BEST</u> tells how you grade each item below. Feel free to ask for help in filling out this survey if you need it.	Client ID
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1. It was easy for me to visit my counselor's office.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
2. I like the job I have now.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
3. My employer provides fringe benefits.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
4. I am satisfied with my fringe benefits.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
5. I got the kind of job I wanted.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
6. I got the services I needed to keep the job I have now.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
7. I chose the kind of job I wanted.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
8. I was able to choose the kind of help I got.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD

Please go onto the next page.

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9. I was able to choose the people who helped me.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
10. I liked the way my counselor treated me.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
11. I liked the way the other Vocational Rehabilitation staff treated me.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
12. I liked the way the other people who helped provide services to me treated me.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
13. I was able to talk to my counselor when I wanted to.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
14. I got services fast enough from Vocational Rehabilitation.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD
15. I would send my friends to Vocational Rehabilitation when they need services.	VERY GOOD	GOOD	OKAY	BAD		VERY BAD

Please go onto the next page.

If you want to talk to someone about your services or job, then check the box OR call the toll-free telephone number by the person you would like to see. If not, then leave both boxes empty.

☐ I want to talk to the Area Supervisor. _____

☐ I want to talk to the Region Manager. _____

If you have things to say about your services or how services could be improved, write them on the back of this page.

COMMENTS