CONFIDENTIAL PER 1998 AMENDMENTS TO THE REHABILITATION ACT OF 1973



COMMISSION ON REHABILITATION SERVICES CUSTOMER SATISFACTION SURVEY

State Form 46098 (R7 / 5-05) / VRS 0007

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 page.

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

You have two choices:

Choice One: Answer the survey in the VR office. Put the survey in the pre-addressed and prestamped 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 **BEST** tells how you grade each item below. Feel free to ask for help in filling out this survey if you need it. Client ID: 8 1. It was easy for me to visit my counselor's office. VERY GOOD OKAY BAD **VERY** GOOD BAD 2. I like the job I have now. VERY GOOD OKAY BAD **VERY** GOOD BAD 3. My employer provides fringe benefits. VERY GOOD OKAY BAD **VERY** BAD GOOD 4. I am satisfied with my fringe benefits. VERY GOOD OKAY BAD **VERY** GOOD **BAD** 5. I got the kind of job I wanted. **VERY** GOOD OKAY BAD **VERY** GOOD BAD 6. I got the services I needed to keep the job I have now. VERY GOOD OKAY BAD **VERY** GOOD BAD 7. I chose the kind of job I wanted. VERY GOOD OKAY **BAD VERY** GOOD BAD 8. I was able to choose the kind of help I got. VERY GOOD OKAY BAD VERY BAD GOOD 9. I was able to choose the people who helped me. VERY GOOD OKAY BAD **VERY** GOOD BAD 10. I liked the way my counselor treated me. VERY GOOD OKAY BAD **VERY** GOOD BAD 11. I liked the way other Vocational Rehabilitation staff VERY GOOD OKAY BAD **VERY** treated me. BAD GOOD 12. I liked the way the other people who helped VERY GOOD OKAY BAD **VERY** provide services to me treated me. GOOD **BAD** OKAY 13. I was able to talk to my counselor when I wanted to. VERY GOOD BAD **VERY** GOOD BAD 14. I got services fast enough from Vocational VERY GOOD OKAY BAD **VERY** Rehabilitation. GOOD BAD OKAY 15. I would send my friends to Vocational VERY GOOD **BAD VERY** Rehabilitation when they need services. BAD GOOD 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 in the comments section on the next page.

COMMENTS	