



Hutt City Budget & Advocacy Service

Budget Service Performance Evaluation Form

Please complete this form as part of your appointment today.
Please circle the appropriate number.

Date: Name:

1. NOT AT ALL

2. PARTLY

3. SATISFACTORILY

Were your expectations of the appointment met?	1	2	3
Did the Financial Mentor discuss your problems, and all the possible outcomes clearly? Were all your questions answered?	1	2	3
Has an offer been made to do further work for you if needed?	1	2	3
Was the offer to continue working with the Financial Mentor accepted?	Yes	No	
Would you return to this Service again for help?	Yes	No	
Any comments you wish to add:			

Thank you very much.