

## Massachusetts Department Of Transitional Assistant

JUSTIN TIMBERLAKE 19 MCKINLEY AVE BOSTON, MA 01902-1639 Agency ID: 1525158 Date: 02/12/2018

Dear JUSTIN TIMBERLAKE

We need to hear from you! DTA is seeking feedback from you about your recent experience working with us. Please take a few minutes to complete the enclosed survey and return it to us in the envelope provided.



The survey will only take a few minutes and will help us improve our services. You do not need to give us your name and, if you choose not to complete this survey, it will not affect your benefits.

Thank you for taking the time to complete the survey!

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## DEPARTMENT OF TRANSITIONAL ASSISTANCE CLIENT SURVEY

Instructions: Please fill in the square that corresponds with the correct answer and if applicable write your answers in the space provided.

1. Have you applied for or recertified benefits from DTA in the past 12 months?	
☐ Yes     No	
a) If you answered "Yes" did the DTA worker offer to help you register to vote?	
☐ Yes ☐ No	
2. Have you visited your local DTA office or called the DTA assistance line in the past year	r?
M Yes □ No	
a) If you answered "Yes" what was the reason or reasons for visiting?	
This is a test for extra	cting
This is a test for extra	
3. Is there anything DTA could do that would help you avoid coming to the office or having	to call the
DTA assistance line?	to can the
If We could respond online	
4. Overall, how would you rate your experience with DTA?	
☐ Excellent	

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