

SAMPLE CUSTOMER FEEDBACK FORMS

Sample 1 – Seat Management

<i>Seat Management Technical Response Form</i>			
Technician: _____		Date: _____	Time In: _____ Time Out: _____
Ticket # _____	Customer Name _____		Location/Phone _____
We have done the following:			
Updated software	Preventive Maintenance	Solved Problem	
Comment: _____			
Work is complete.	Work is incomplete.	We will return on __/__/__ at __:__ to:	
System was password protected.	Parts are on order.	User was not here. Please call _____ to reschedule.	
Customer Signature _____		Technician Signature _____	

<i>Customer Satisfaction Survey</i>														
Name: _____					Phone No. _____									
Ticket # _____														
On a scale from 1 to 5, where 5 is COMPLETELY SATISFIED and 1 is COMPLETELY DISSATISFIED, please rate the service you received.														
CATEGORY					Help Desk Call					Deskside Visit				
					5	4	3	2	1	5	4	3	2	1
Overall service you received at Help Desk														
Overall service you received Deskside														
Accuracy, completeness of technical information														
Product knowledge														
Courtesy and professionalism														
Availability of resources to complete service request														
Timeliness of response														
Satisfaction level regarding your service request														
Submit to (Name, location) as quickly as possible.														