**EXIT QUESTIONNAIRE**

As you leave Keystone Sacco Society Ltd as a registered member, we would like to ask you to share your experience as our esteemed customer for the time we have served you. We would appreciate you taking a few minutes to answer the following questions as honestly as possible. Your response will greatly contribute towards continuous improvement of our customer experience in line with our mission and vision.

**We commit to holding your responses in strict confidence.**

1. How was your experience when you first registered as a member with our Sacco?

Excellent [ ] very Good [ ] Good [ ] bad [ ] very bad [ ]

1. Did you find our staff well equipped with Sacco products? Yes [ ] No [ ]
2. Did our Sacco meet your goals as a member? Yes [ ] No [ ]
3. What did you like about our services?.......................................................................................................................................................................................................................................................................................................
4. What did you dislike about our services?......................................................................................................................................................................................................................................................................................................
5. What made you decide to withdraw your membership?.................................................................................................................................................................................................................................................................................................................................................................................................................................
6. Before making your decision to withdraw as a member, did you explore other options available that would have made you retain your membership? Yes [ ] No [ ]If yes, which option did you explore and what was the feedback?...............................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................
7. What would you wish we do differently to make members stay in the Sacco?..................................................................................................................................................................................................................................................................................................................................................................................................................................
8. What are your contact details in case the Sacco would wish to contact you for business in future?

Name:................................................................

Phone Number:..................................................

1. CEO’s comment:………………………………………………………………………….