



### CONSUMER FEEDBACK SURVEY

(Please use the back of this survey if you require more space)

1. What would you like to tell us about our service ?

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.....

2. What do you *like* about our service ?

.....  
.....

3. What do you *dislike* about our service ?

.....  
.....

4. How can we improve our service ?

.....  
.....

5. What else would be useful for our service to provide ?

.....  
.....

Would you be interested in becoming a volunteer and/or participate in reviewing and developing our services and programs ?

Yes

No

If yes, please provide name and contact details and we will contact you with further information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone : \_\_\_\_\_ m: \_\_\_\_\_

Thank you for taking the time to fill in this survey, your comments are valued and will help us to review and improve our services. Please use back if need more space for comments.

Please place this form in our suggestion box.