



# SDIR Customer Service Satisfaction Survey

We would like to know your level of satisfaction with our service today. Please take a moment to complete this form and fax it to (619) 692-6619 or email [sdir@sdiz.org](mailto:sdir@sdiz.org) . Your feedback will help us improve the quality of our service.

Name of SDIR Representative:

How was today's SDIR service provided?  phone  in-person  email  other

Please check the boxes below relating to the level of your SDIR service:

Service Related Aspects	Poor	Fair	Good	Excellent
1. The time it took SDIR staff to resolve your issue/question.				
2. How clear was the information provided to you?				
3. SDIR staff knowledge of the subject discussed?				
4. How well did our SDIR staff answer your questions?				
5. If the service could not be provided or issue resolved, another option or estimated time of resolution was provided?				
6. Your overall satisfaction with the service provided by our staff				

Please comment on any of the above and/or note other impressions of your experience:

If you would like our Program Manager to call you, please give us your name and phone number and good time to reach you.

Thank you for taking the time to help us to serve you better!

<i>For Internal Use Only:</i>			
<i>Date of service:</i>	<i>Name of SDIR Representative</i>	<i>Service start:</i>	<i>Service end:</i>
<i>Name of Provider:</i>	<i>Facility/Site:</i>	<i>Purpose of Service:</i>	