



Employee Satisfaction Survey

Date: _____

Employer: _____

Name: _____

Phone Number: _____

Email: _____

As part of our continuous effort to improve the delivery of our services to you, we ask that you take a few minutes to complete this survey.

1. Overall, how would you rate this Rapid Response Informational Session?

Excellent

Good

Disappointing

Poor

2. Please rate the **presentation**:

a. Was it organized?

Very organized

Organized

Disorganized

b. Was it clear?

Very clear

Clear

Unclear

3. Please rate the **content**:

a. Was it useful?

Very useful

Useful

Not useful

b. Will it help you with your next steps?

Very helpful

Helpful

Not helpful

4. The **amount** of information and material covered seemed to be:

Too much

Just right

Too little

5. Were the **presenters** clear in the information that was being discussed?

Very clear

Clear

Not clear

Comments and/or suggestions for future sessions:

Thank you!