

LANSCCE Training Office Process Improvement Form

You recently contacted our training service department. We want to assure that you're satisfied with our service. Please complete this short survey. Your feedback will be used to improve our service.

How did you contact the TA-53 Training office for training?

- In Person Telephone E-Mail

Response Time

What was the reason for your request?

- Badge reader access Proctoring Training Report/Status Other _____

The Training Office handled my request quickly.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

Knowledge of your Training Representative

The Training Office was very knowledgeable.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

What best describes what happened?

- Able to resolve problem quickly Gave the wrong information Could not resolve problem
 Did not understand the question Gave unclear answers Disorganized
 Didn't know how to handle problem Other _____

Characteristics of your Training Representative

How well do each of the following words describe your customer service representative?

Very Well		Not at all		
1	2	3	4	5

Patient

Enthusiastic

Friendly

Responsive

Courteous