

Springfield Office

Greenfield Office

Pittsfield Office

New England Farm Workers' Council Customer Satisfaction Survey

You recently used the services of the New England Farm Workers' Council for help in finding child care and receiving information about possible help to pay for the care. We want to thank you for using our service. We would appreciate you taking a few minutes to give us feedback about our service. Our goal is to be as helpful as we can be in a family's search for child care and your responses to the following questions will help us make improvements in any way we can.

| Thank you | for your | time and | feedback. |
|-----------|----------|----------|-----------|
|-----------|----------|----------|-----------|

| (Optional) Name: | | | Phone #: | | | | |
|------------------|---|---|----------------------------------|-------------------------------------|--------|---|---|
| | | - | taff perse Satisfied | | | h you appeared to und N/A If you used the | erstand your needs? online referral system |
| 2. | How satisfied are y use of our on-line of (Please circle one) | hild care searcl | | | | sult of your call (or vising Satisfied | it) to our office or the |
| 3. | If you received reference to your needs? (Please circle one) | | are progr | rams, are you Satisfied | | fied that the referrals | offered options that |
| 4. | | • | | eferrals we ga | ive yo | | |
| 5. | for your family? | | - | | | how to choose the bes | t child care program |
| 6. | | • | atisfied commun Yes | Satisfied hity services to No | | Satisfied et your family's needs | (other than child |
| | 6A. If you received (Please circle one) | | : her serv atisfied | ices, how sat Satisfied | | are you that they will Satisfied | be helpful? |
| | Did you feel comfo ease circle one) | rtable, welcom Very Satisfied | | • | | king with our staff? N/A If you used the o | online referral system |
| 8. | After you received (Please circle one) | • • • • | ou satisf i atisfied | ied with the k Satisfied | | ledge you've gained ab Satisfied | out quality care? |
| 9. | After you received you pay for child ca (Please circle one) | re? | ou satisf i atisfied | ied with the k | | ledge you've gained ab | out options to help |
| 10. | . Please rate how sa (Please circle one) | tisfied you wer | | | ices y | | |
| | e appreciate you taki | ng the time to c | omplete | | | rvey to us. If you have a r, Brenda Montgomery | |

Fax (413) 746-9743

Fax (413) 475-3152

Fax (413) 236-5894



(413) 272-2207

(413) 475-3656

(413) 236-5890