Division of Forensic Services- Crime Laboratory Service Feedback Form

In an effort to continually improve our services to our customers, we are asking for your input in the form of the survey below. If you wish to point out any of the following as our particular <u>strengths</u> or <u>weaknesses</u> please indicate them below:

Characteristics of Services Provided

1.	Responsiveness of laboratory personnel to your questions.	0	5.	Effectiveness in communication of policies regarding acceptance/ rejection of evidence.
2.	Timeliness in answering/addressing concerns or requests.		6.	Responsiveness of senior staff for discussions about problems/ concerns.
3.	Turnaround time of examinations.		7.	Quality of court testimony by laboratory
4.	Clarity of reports.			personnel. (if applicable)
Chara	acteristic No.			Comments
Subm	nitted by (if a response is desired, please ir	nclude phone n	umber)	:
	cy Name:			• & Rank:
		Phone N	Number:	
Please return this form to the laboratory via fax to: Mark Gil, QA Manager, Fax: (516) 572-5818. Feel free to call us with any questions or concerns at (516) 572-5193.				

Thank you very much for taking the time to help us improve our services to you.