



COMMUNITY SERVICES Older Adult Services

CUSTOMER SERVICE SURVEY

Thank you for using City of Irvine, Older Adult Services. We hope your experience was positive and pleasant, and your needs were met! Please complete and return this survey to help us learn what we do well and what we need to improve. Your opinions and comments are important to us!

SELECT FACILITY: ☐ RANCHO SENIOR CENTER ☐ LAKEVIEW SENIOR CENTER DATE _____

SERVICE RECEIVED

Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> FACILITY RESERVATIONS | <input type="checkbox"/> KEEN CENTER FOR RESOURCE LINKAGE |
| <input type="checkbox"/> FRONT DESK HELP | <input type="checkbox"/> RECREATION PROGRAM (Classes, Excursions) |
| <input type="checkbox"/> NUTRITION PROGRAM | PROGRAM ATTENDED _____ |

QUALITY OF SERVICE

Check your answer to the following questions:

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
I was served in a reasonable amount of time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I received knowledgeable, accurate and thorough service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff was friendly, polite and helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The service I received met my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would use this service again or refer a friend.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FACILITY INFORMATION

Circle the answer that best describes the cleanliness and presentability of the facility:

Lobby:	IMPRESSED	UNIMPRESSED	DID NOT NOTICE
Activity Room:	IMPRESSED	UNIMPRESSED	DID NOT NOTICE
Kitchen:	IMPRESSED	UNIMPRESSED	DID NOT NOTICE
Restrooms:	IMPRESSED	UNIMPRESSED	DID NOT NOTICE

CUSTOMER INFORMATION

Age: ☐ 18-29 ☐ 30-39 ☐ 40-49
☐ 50-59 ☐ 60-69 ☐ 70-79
☐ 80-89 ☐ 90+

Home address zip code: _____

COMMENTS / SUGGESTIONS

If you would like a response to your comments, please provide your name and phone number:

NAME* _____ PHONE* _____