

BROWN COUNTY VETERANS SERVICES CLIENT SURVEY

IN ORDER TO PROVIDE THE VETERANS OF BROWN COUNTY WITH THE BEST POSSIBLE SERVICE WE NEED YOUR OPINION. ALL SURVEYS ARE CONFIDENTIAL TO THE BROWN COUNTY SERVICES COMMISSION. YOU WILL ONLY BE CONTACTED IF YOU REQUEST A RESPONSE. WE APPRECIATE YOUR COOPERATION.

Date of your visit to our office: _____

How did you hear about our services?

a. billboard b. newspaper c. friend d. other _____

What services did you receive from our office? a. financial assistance b. benefits c. transportation d. funeral assistance e. other (please explain)

Were you greeted in a friendly and helpful manner? Yes or No

Did you have an appointment? Yes or No

Did you see a Service Officer? Yes or No (If so which one _____)

Did you have to wait for a long period of time? Yes or No

How would you rate your overall experience? 1 2 3 4 5 (1 being poor, 2= very little help 3= average 4= good and 5 being extremely helpful)

Would you recommend this office to other Veterans or their families? Yes or No

Would you like a response from the Commissioners about your service? Yes or No

Comments on how we could make your experience with Brown County Veterans Services better:

OPTIONAL:

Name Phone Number

Thank you for taking the time to complete this survey.

Brown County Veterans Service Commission