

Polk County Wisconsin

"GIFT OF THE GLACIERS"



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Environmental Services Division Customer Service Feedback

How did I/We do?

The Polk County Environmental Services Division is committed to customer service excellence. Your input is critical in maintaining and improving the quality of services we deliver.

Thank you for taking the time to provide us your feedback.

*1. Please enter the name of the Environmental Services Division staff member with whom you interacted:

2. What was the purpose for your interaction with the staff member? Please be as detailed as possible:

3. Date of interaction with staff member?:

4. Did the staff member(s) respond in a timely manner?:
Yes
No
No opinion

5. How long did it take for the staff member to respond?:
Same business day
Within 2 business days
3 to 4 business days
5 or more business days

For questions 6-10, please choose your level of agreement or disagreement. 6. The staff member I interacted with was courteous:

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

7. The staff member I interacted with was attentive to my question(s) or concern(s):
Strongly Agree

Agree
Neither Agree nor Disagree
Disagree
Strongly Disagree

8. The staff member I interacted with was knowledgeable about my question(s) or concern(s):
Strongly Agree
Agree
Neither Agree nor Disagree
Disagree
Strongly Disagree

9. The staff member I interacted with communicated in a way that was understandable:
Strongly Agree
Agree
Neither Agree nor Disagree
Disagree
Strongly Disagree

10. The staff member I interacted with was helpful:
Strongly Agree
Agree
Neither Agree nor Disagree
Disagree
Strongly Disagree

11. Overall, how satisfied were you with the customer service you received from the staff member?:
Very Satisfied
Satisfied
Neutral
Dissatisfied
Very Dissatisfied

12. Please feel free to provide any additional comments on your interaction(s) with this or other Environmental Services Division staff member(s):

*13. Would you like to discuss your feedback with the staff member(s) supervisor?:
Yes, I would like to be contacted by the supervisor to discuss my responses.
No, I do not need to be contacted by the supervisor to discuss my responses.

14. Please provide your contact information, so the supervisor can contact you:

Enter this number into the "Security Code" field:



*Security Code:

* - denotes required field

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