huu ay aht

ANCIENT SPIRIT, MODERN MIND

Quality Service Evaluation Form

We are listening!

We want to ensure that we meet your expectations. Please use this form to tell us about your experience taking part in our programs and how we can improve our offer.

Your name and email address are optional!

Name:

Email address:

You can evaluate the quality of our areas of service by giving from 1 point to 5 points, accordingly.

Huu-ay-aht — Very Satisfied — Not at all satisfied

	N/A	5	4	3	2	1
Health Services	☐	☐	☐	☐	☐	☐
Cultural Program	☐	☐	☐	☐	☐	☐
Social Assistance	☐	☐	☐	☐	☐	☐
Child & Family Services	☐	☐	☐	☐	☐	☐
Education	☐	☐	☐	☐	☐	☐
Employment	☐	☐	☐	☐	☐	☐
Communications	☐	☐	☐	☐	☐	☐
Financial Administration	☐	☐	☐	☐	☐	☐
Reception / Administration	☐	☐	☐	☐	☐	☐
Your overall experience	☐	☐	☐	☐	☐	☐

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Do you have other comments or detail for your responses above?

ƛ̓eko ƛ̓eko (tl̓-eko, Thank you!)

Date:			

Please hand it to our staff at one of our offices, email it to info@huuayaht.org or fax it to 250.723.4646