

„EUROTEST-CONTROL” EAD

QUESTIONNAIRE

DEAR SIRs,

as customers of our services, we would greatly appreciate it, if you could spare a few minutes of your time to complete this short questionnaire, thank you in advance. Your opinion is important to us and will help us to improve our performance and services

Company: Name:

Address:..... Position:

Please mark or tick the appropriate box with an X:

<p>1. Performed service:</p>	<p>5. Do you wish to use our services again in the future?</p> <p><input type="checkbox"/> definitely YES</p> <p><input type="checkbox"/> probably YES</p> <p><input type="checkbox"/> not sure</p> <p><input type="checkbox"/> probably NO</p> <p><input type="checkbox"/> definitely NO</p>
<p>2. How often do you use our services?</p> <p><input type="checkbox"/> once a month or more often</p> <p><input type="checkbox"/> every 2-3 months</p> <p><input type="checkbox"/> 2-3 times per year</p> <p><input type="checkbox"/> once a year or less</p>	<p>6. Would you recommend our services to others?</p> <p><input type="checkbox"/> definitely YES</p> <p><input type="checkbox"/> probably YES</p> <p><input type="checkbox"/> not sure</p> <p><input type="checkbox"/> probably NO</p> <p><input type="checkbox"/> definitely NO</p>
<p>3. How satisfied are you with our services?</p> <p><input type="checkbox"/> very satisfied</p> <p><input type="checkbox"/> satisfied</p> <p><input type="checkbox"/> not satisfied</p>	<p>7. Will you be able to compare EUROTEST-CONTROL EAD with other laboratories:</p> <p><input type="checkbox"/> better</p> <p><input type="checkbox"/> equal</p> <p><input type="checkbox"/> worse</p>
<p>4. Please rate our performance on providing quality services</p> <p>Quality: <input type="checkbox"/> high <input type="checkbox"/> average <input type="checkbox"/> low</p> <p>Deadline: <input type="checkbox"/> high <input type="checkbox"/> average <input type="checkbox"/> low</p> <p>Service: <input type="checkbox"/> high <input type="checkbox"/> average <input type="checkbox"/> low</p> <p>Reliability: <input type="checkbox"/> high <input type="checkbox"/> average <input type="checkbox"/> low</p> <p>Cooperation: <input type="checkbox"/> high <input type="checkbox"/> average <input type="checkbox"/> low</p>	<p>8. If you have any further comments or suggestions concerning our services please feel free to add them here.</p>

Date:

Signature:

Thank you for your time!