

Client Feedback Questionnaire

As part of our commitment to improving the services we provide, we ask our clients to complete this feedback questionnaire. We would be grateful if you could help us improve by completing this form:

Q1. How satisfied were you with our overall level of service?

(PLEASE CHECK ONE BOX)

Very satisfied Fairly Satisfied Fairly dissatisfied Very dissatisfied Undecided

Q1a. If dissatisfied, please tell us briefly why this is:

Q2. Did we give you information/advice that was easy to understand?

(PLEASE CHECK ONE BOX)

Very easy Fairly easy Fairly difficult Very difficult Undecided

Q2a. How might we improve?

Q3. How informative did you find our staff?

(PLEASE CHECK ONE BOX)

Very good Fairly good Fairly poor Very poor Undecided

Q4. How well did we keep you up-to-date with the progress of your case?

(PLEASE CHECK ONE BOX)

Very well Fairly well Fairly poor Very poor Undecided /Not Applicable

Q5. How well did we listen to what you had to say?

(PLEASE CHECK ONE BOX)

Very well Fairly well Fairly poor Very poor Undecided

Q6. Did we treat you fairly at all times?

(PLEASE CHECK ONE BOX)

Yes No Don't know

Q7. Would you recommend us to someone else if they needed legal help or advice?

(PLEASE CHECK ONE BOX)

Certain to Likely to Unlikely to Certain not to Undecided

Q8. Do you have any further comments or suggestions that may help us to improve our level of service?

THANKS!

Please continue on another sheet if necessary.

Thank you for completing this questionnaire. If you would like us to contact you to discuss any of the issues raised, please complete your name and address below.