



In order to provide you with the best possible services, Youth Haven Services, Inc. would like to receive feedback from you regarding our services. By completing this survey we will be able to identify our strengths and weaknesses and make improvements. Please let us know if you need assistance in completing this survey. When done please mail it to us at: Youth Haven Services /Survey
229 Turner Drive • Reidsville, NC 27320

Please check appropriate box

- Client/Guardian Satisfaction Survey for Children 11 years and under
- Client Satisfaction Survey for Consumers 12 and older

Program: _____

Client's First Name (optional) _____

Please provide feedback on the following:

1. How satisfied are you with the level of professional and courteous service received from our staff?

- Very Satisfied Satisfied Dissatisfied Very Dissatisfied

What "wowed" you or disappointed you about the professionalism of our staff? _____

2. How satisfied are you with the support received to achieve goals?

- Very Satisfied Satisfied Dissatisfied Very Dissatisfied

What "wowed" you or disappointed you about the support received from our staff? _____

3. How satisfied are you with the access to and availability of our staff, including after hours and emergencies?

- Very Satisfied Satisfied Dissatisfied Very Dissatisfied

What "wowed" you or disappointed you about the accessibility to services? _____

4. Overall, how satisfied are you with your experiences with Youth Haven Services?

- Very Satisfied Satisfied Dissatisfied Very Dissatisfied

What "wowed" you or disappointed you about our services overall? _____

5. Sometimes providers and clients misunderstand each other because they come from different backgrounds. Have you had a problem with this in your experiences with Youth Haven Services?" No Yes

Describe: _____

Other comments:

Thank you for participating in our survey!