

# We are interested in hearing about your experience in the Student Services Building. What services were you looking for today?

THINKING ABOUT YOUR EXPERIENCE IN THE STUDENT SERVICES BUILDING, PLEASE INDICATE THE EXTENT TO WHICH YOU AGREE OR DISAGREE WITH THE FOLLOWING STATEMENTS:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
a. I was served at the front counter and/or the reception desk downstairs in a timely manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The staff member was knowledgeable and understood what I needed to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The staff member was friendly, courteous and helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. My inquiry was resolved in a timely fashion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Signs on campus and in the building helped me find my destination easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I was given clear instructions to access the service(s) I needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

AS A RESULT OF THE SERVICE PROVIDED, DO YOU FEEL YOU ARE BETTER PREPARED AND ABLE TO SUCCESSFULLY COMPLETE YOUR ACADEMIC YEAR?  Yes  No

THE FRONT DESK AND SERVICE COUNTER IS OPEN FROM MONDAY TO THURSDAY, 8 AM TO 6 PM AND FRIDAY 8 AM TO 4:30 PM. DO THESE HOURS OF OPERATION SUIT YOUR SCHEDULE?  Yes  No

WOULD YOU LIKE TO SEE OTHER SERVICES AVAILABLE DURING THE SAME HOURS AS ABOVE?  Yes  No

If yes, select all that apply.

- a. Receiving advice on my program of choice from an admissions officer
- b. Meeting with a Financial Aid Officer
- c. Resetting my OAN number and/or password
- d. Getting a hold on my account removed so that I can access my course schedule
- e. Meeting with a student advisor from my school office
- f. Meeting with a Learning Specialist in Student Academic Learning Services
- g. Receiving help in my job search/resume writing/interview skills
- h. Reporting an experience of discrimination
- i. Obtaining my student identification card

## ADDITIONAL FEEDBACK

I LIKED...

I WOULD CHANGE...

OTHER COMMENTS/SUGGESTIONS...

NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

WORKSHOP/EVENT: \_\_\_\_\_

# Thank you

FOR YOUR FEEDBACK



QUOTES/TESTIMONIALS:

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Do you permit us to use your quotes in reports and/or marketing materials? Yes  No

May we include your name? Yes  No