

TRI-COUNTY COMMUNITY ACTION AGENCY
CUSTOMER SURVEY

1. What type of service did you receive? _____
2. How were you referred to Tri-County Community Action? (Newspapers, Friend, Agency, Church, or other organization. _____
3. How were you treated by staff? _____
4. Was service satisfactory? _____
5. Did service meet your needs? Yes _____ No _____
6. Did service improve your family environmental/nutritional needs? Yes _____ No _____
7. How long have you know about Tri-County CAA services?
5 yrs or longer _____ 2-4 yrs _____ 1-2 yrs _____ Less than 1 yr _____
8. Did our services improve your education level? Yes _____ No _____
9. Were you referred to Weatherization? Yes _____ No _____
 - Commodities Yes _____ No _____
 - LiHeap Yes _____ No _____
 - Emergency Assistance Yes _____ No _____
 - Food Pantry Yes _____ No _____
 - Education Program Yes _____ No _____
 - Budget/Credit Counseling Yes _____ No _____
 - Tele-care Yes _____ No _____
 - Homecare Yes _____ No _____
 - Home delivered meals Yes _____ No _____
 - Transportation Yes _____ No _____
 - Adult Day Services Yes _____ No _____
10. Are you currently in an Education Program? Yes _____ No _____
11. Do you volunteer for an agency or organization? Yes _____ No _____
12. Are you employed? Yes _____ No _____
13. Have you had an increase in salary in the last year? Yes _____ No _____
14. Has your home been weatherized? Yes _____ No _____
15. Has Tri-County CAA helped you to become self sufficient? Yes _____ No _____
16. What do you think Tri-County could do to improve their services?

Name: _____ Date: _____

Please use the back side of this survey to enter any additional comments you wish to express.