



PARTICIPANT SATISFACTION SURVEY

Instructions: Please read each statement carefully and circle the number that describes your level of satisfaction. Comments and suggestions are encouraged.

Please mail these back before _____ to be entered into a drawing for \$50 gift card

LE BLANC CONSULTING ILS SERVICES	☺		Neither Satisfied Nor Dissatisfied	☹		Don't Know or Doesn't Apply
	Very Satisfied	Satisfied		Dissatisfied	Very Dissatisfied	
INTEGRITY: 1. I am treated well by my ILS staff.	5	4	3	2	1	NA
2. I trust my ILS staff.	5	4	3	2	1	NA
SAFETY: 3. I feel safe.	5	4	3	2	1	NA
4. I am as healthy as I can be.	5	4	3	2	1	NA
RESPECT: 5. I feel respected by staff.	5	4	3	2	1	NA
6. Staff listen to my opinions	5	4	3	2	1	NA
PERSONAL GROWTH: 7. I am learning new things.	5	4	3	2	1	NA
8. I am learning things I want to learn	5	4	3	2	1	NA
QUALITY: 9. Staff knows what is important to me.	5	4	3	2	1	NA
10. Staff knows what to do to support/help me.	5	4	3	2	1	NA
STEWARDSHIP: 11. I have the things I need.	5	4	3	2	1	NA
12. There are enough staff to support/help me.	5	4	3	2	1	NA
COMMUNITY INVOLVEMENT: 13. I am as active in the community as I want to be.	5	4	3	2	1	NA
14. I am encouraged to speak out about things that are important to me.	5	4	3	2	1	NA
15. I am happy with my ILS Services.	5	4	3	2	1	NA

How can staff support you better?

Name: _____ Phone Number _____

If a LeBlanc Consulting staff assisted with completion, please sign: _____