



Customer Satisfaction Survey



CONTINUUM OF CARE HOUSING PROGRAMS

The City of Winston-Salem wants to hear from you. Please complete this survey to tell us about your level of satisfaction with the services you received to meet your housing needs.

Name (optional): \_\_\_\_\_ Phone Number/Email (optional): \_\_\_\_\_

Please check the agency or agencies from which you received services:

- Checkboxes for: AIDS Care Service, Bethesda Center for the Homeless, CenterPoint Human Services, Community Intake Center, Experiment in Self-Reliance, Others (please list them), Family Services, Housing Authority, Next Step Ministries, Samaritan Ministries, The Salvation Army

Please check the services you received:

- Checkboxes for: Rapid Rehousing/Permanent Housing, Shelter Plus Care/Permanent Housing, Emergency shelter or transitional housing, Case Management, Help with rent, Other services (list them): \_\_\_\_\_

About how long did it take for you to receive housing once you contacted the agency? (check one)

- Checkboxes for: One month or less, 2 to 3 months, 4 to 6 months, Over 6 months

Please check all of the following statements which apply:

- Checkboxes for: I received services in a timely manner, The agency or agencies helping me listened to me and assisted me in getting my needs met, Service was provided to me in a professional and courteous manner, The services provided did not meet my expectations.

Overall, how satisfied were you with the services you received? (check one)

- Checkboxes for: Very satisfied, Satisfied, Neutral, Dissatisfied, Very dissatisfied

Please provide any explanations about your responses above.

Empty rectangular box for providing explanations.

Please return your survey to: Laura Lama, City of Winston-Salem CBD Dept. PO Box 2511, Winston-Salem, NC 27102 Email: laural@cityofws.org. Phone (336) 734-1440

If you have questions, please contact Ms. Mellin L. Parker at (336) 734-1310 or mellinp@cityofws.org.