

REGISTRAR'S OFFICE

1735 Wahnish Way, C.A.S.S. Bldg., Suite #206, Tallahassee, FL 32307

Office: (850) 599-3115 Fax: (850) 561-2428 Email: registrardocs@famu.edu

Customer Satisfaction Survey

You are very important to us. Please help us serve you better by taking a few minutes to tell us about the service you received today. Check the box(es) that applies to you.

1. I am a: Current student [] an Alumnus [] a Faculty/Staff [] Other (please specify)

2. How did you interact with the Registrar's Office?

[] Email	[] In Person	[] By Telephone	Date	//
-----------	--------------	------------------	------	----

3. What was the purpose of your interaction with the Registrar's Office?

Degree)
Degree
n event

4. In general, how do you prefer to get information or have your questions answered?

Phone	Written Correspondence
In person	E-mail

5. Overall, I am satisfied with the service today.

Agree

If you disagree, please explain below...

Disagree

6. If you would like us to contact you directly regarding this survey, please provide your email address:

E-mail:

Thank you for giving us the opportunity to serve you better!