

**Client Feedback Questionnaire**

This client feedback questionnaire is part of our commitment to improving the service we provide.  
We would be grateful if you could help us by completing this form and return it to us.

Please be assured that this survey will remain completely confidential.

Fee Earner:

Matter No:

Q1. How satisfied were you with our overall level of service?

Very satisfied                  Fairly satisfied                  Undecided                  Fairly dissatisfied                  Very dissatisfied

Q1a. If dissatisfied, please tell us why (Continue on another sheet if necessary).

Q2. Was the information/advice we gave you easy to understand?

Very easy                  Fairly easy                  Undecided                  Fairly difficult                  Very difficult

Q2a. How might we improve?

Q3. How informative did you find our staff?

Very good                  Fairly good                  Undecided                  Fairly poor                  Very poor

Q4. How well did we keep you up-to-date with progress?

Very well                  Fairly well                  N/A – one off                  Fairly poor                  Very poor

Q5. How well did we listen to what you had to say?

Very well                  Fairly well                  Undecided                  Fairly poor                  Very poor

Q6. Would you recommend us?

Certain to                  Likely to                  Undecided                  Unlikely to                  Certainly not

Q7. Do you have any further comments or suggestions that may help us to improve our level of service? (continue on another sheet if necessary).

Thank you for completing this form, we appreciate your comments both positive and negative.