



FBI Laboratory Customer Satisfaction Assessment

Thank you for using the services of the FBI Laboratory. In an effort to improve our services to you and your agency, please provide feedback on your experience in relation to this case. Upon completion of this survey, please return it by fax to the Quality Assurance and Training Unit at 703-632-8285.

Examiner _____ Unit: _____
:

Laboratory Number: _____

Your Name: _____ Phone: _____

Agency: _____ Email Address: _____

Please respond to the following about your experience regarding the examinations provided by the **above listed examiner**:

A. My communication with the Examiner met my expectations:

Yes___ or No___, I expected _____

B. The _____ examinations were completed in a timeframe that met my expectations:

Yes___ or No___, I expected _____

C. The clarity, format, and verbiage of the FBI Laboratory report met my expectations:

Yes___ or No___, I expected _____

D. The overall quality of service received:

Excellent___ Satisfactory___ Unsatisfactory___

F. How could we improve our services? _____

G. Are there additional examinations/services we could offer? _____

Thank you for taking the time to help us improve our services.

PAPERWORK REDUCTION ACT NOTICE

The information required on this form is in accordance with the Paper Reduction Act of 1995. The estimated average burden association with this collection of information is 5 minutes. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Federal Bureau of Investigation, Laboratory Division, Quality Assurance and Training Unit, 2501 Investigation Parkway, Quantico, VA 22135.

Date Received in QATU _____

By _____

Entered in Assessment Database _____

Copy to ECU _____