

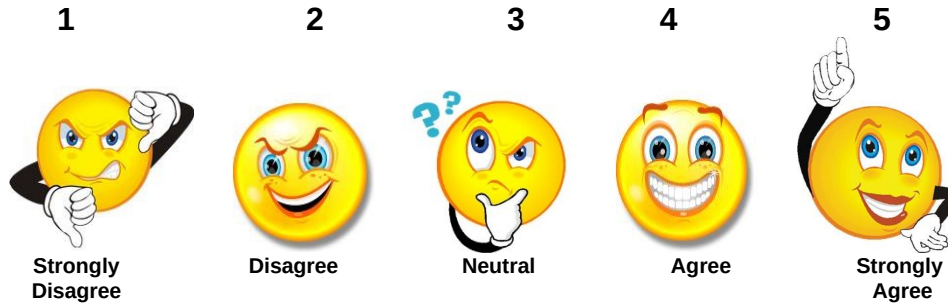
**Chinle Service Unit (CSU) Health Promotion
 Customer Satisfaction Survey**

Date: ___/___/___

Thank you for participating in one of our Health Promotion programs today. You are a valued customer and what you have to say is important to us. Please take a moment to let us know how we are doing by filling out this form and giving us your honest feedback.

- Gender:**
 Male
 Female
- Age:**
 Less than 18 years 35 – 64 years
 18 – 34 years 65 years and older

For each statement below circle the numbers 1-5 based on this scale:



- 1. I would recommend the Health Promotion Program to my family and friends. - - - - - 1 2 3 4 5
- 2. Usually my health is good. - - - - - 1 2 3 4 5
- 3. I am sure I can take care of my own health (T'áá hwó'ají t'éego). - - - - - 1 2 3 4 5
- 4. The staff treated me with courtesy and respect at all times today. - - - - - 1 2 3 4 5
- 5. The facility/event was clean and safe for all participants. - - - - - 1 2 3 4 5
- 6. The staff worked well together and communicated effectively. - - - - - 1 2 3 4 5

What comments or suggestions do you have to improve our services, activities, and events?

HP STAFF USE ONLY

- Injury Prevention --- CCWP --- School Health --- AV production services --- MSPI --- DVPI

HP Staff: _____ HP program: _____ HP Site: Chinle Pinon Tsaille

Revised 7/28/15

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