

# Food Service Survey

Division of Amenities & Transportation Services (DATS)

## Introduction

OMB #0925-0648  
Expiration Date: 06/30/2024

This anonymous survey is to obtain your perception of the food services offerings at the NIH facilities located in Montgomery County, MD. Your voluntary feedback is valuable and will be used to evaluate our performance in providing food services to the NIH staff and guests at owned and leased facilities in Montgomery County, MD.

Please take approximately 5 minutes to complete this survey as your feedback is much appreciated.

If you encounter any technical problems, or have questions please contact Isaiah Crisp, with DQMP, at [ORSSurveySystem@mail.nih.gov](mailto:ORSSurveySystem@mail.nih.gov).

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## Food Service Survey

## Burden Disclosure

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*Public reporting burden for this collection of information is estimated to average five minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0648). **Do not return the completed form to this address.***

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\* Required

## Demographics

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1. What type of facility did you use? \*

- Dining Center
- Coffee Bar
- Concession Stand

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\* Required

## Dining Center

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2. Which building (*bldg.*) dining center did you visit? \*

Select your answer

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*If respondent chooses "dining center" in Q1.*

\* Required

### Coffee Bar

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2. Which building (*bldg.*) coffee bar did you visit? \*

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*If respondent chooses "coffee bar" in Q1.*

\* Required

### Concession Stand

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2. Which building (*bldg.*) concession stand did you visit? \*

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*If respondent chooses "concession stand" in Q1.*

### Facility Ratings

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3. How was the cleanliness of the facility?

	Very Poor	Poor	Fair	Neutral	Ok	Good	Very Good
Facility Cleanliness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Please rate your satisfaction with the following:

	Very Unsatisfied	Unsatisfied	Somewhat Unsatisfied	Neutral	Somewhat Satisfied	Very Satisfied
Food Variety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Appearance of Food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Taste of Food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wait Time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall Value	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. If you ranked neutral, or lower, feel free to provide additional information.

Enter your answer

6. Are you satisfied with the current hours of operations? See schedule here:

<https://ors.od.nih.gov/pes/dats/food/Pages/index.aspx>

- Yes
- No
- Undecided

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\* Required

### Mobile Ordering

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7. Did you utilize the food mobile/desktop ordering app? \*

- Yes
- No
- Don't know what that is

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8. How often do you use the app?

- Occasionally
- Once a Week
- 2 - 4 Times a Week
- Daily
- Not Sure

9. Please rate your satisfaction with the app on the following:

	Very Unsatisfied	Unsatisfied	Somewhat Unsatisfied	Neutral	Somewhat Satisfied	Satisfied	Very Satisfied
Visually Appealing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ease of Use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. If you ranked neutral, or lower, feel free to provide additional information.

Enter your answer

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*If respondent chooses "yes" in previous question.*

### Customer Service/Additional Feedback

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8. Please rate your agreement about the staff on the following:

	Strongly Disagree	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree	Strongly Agree
Courteous	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helpful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. If you ranked neutral, or lower, feel free to provide additional information.

Enter your answer

10. Would you like to further speak to a DATS representative regarding your overall experience?  
*(Please provide a phone number and/or email)*

Enter your answer

 Thanks!

Thank you for your time and valued feedback!