**CRI Customer Satisfaction Survey**

*Thank you for participating in the Collaborative Reform Initiative Technical Assistance Center (CRI-TAC).* The purpose of this survey is to gather information about your knowledge, perceptions, and outlooks relating to the technical assistance (TA) received and to collect information that will better enable us to assess the delivery of technical assistance. Survey responses will be summarized in aggregate, statistical form and your personal identifying information cannot be linked to your survey responses. There are no known risks in participating in this survey. Your participation is completely voluntary: you may choose not to answer certain questions, or not to participate in the survey at all, without penalty. *We appreciate your feedback!*

**Agency Name:**

**CRI Program:**

1. **Please provide the most accurate response to each of the statements below by marking (x), as it reflects the technical assistance process.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Statement** | **Strongly**  **Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly**  **Disagree** |
| My agency received assistance in a *timely manner*. |  |  |  |  |  |
| The process for requesting assistance was *easy to navigate*. |  |  |  |  |  |
| The *burden placed* on my agency while receiving technical assistance was *minimal*. |  |  |  |  |  |

**Use the open text box below provide any additional comments on these items.**

1. **Please provide the most accurate response to each of the statements below by marking (x), as it reflects the informational resources provided to your agency. Examples of informational resources includes publications, guidebooks, reports, and webinars.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Statement** | **Strongly**  **Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly**  **Disagree** | **Not Applicable** |
| Informational resources provided to my agency were *high quality*. |  |  |  |  |  |  |
| Informational resources provided to my agency were relevant to my *problem*. |  |  |  |  |  |  |
| Informational resources provided to my agency were relevant to my *agency*. |  |  |  |  |  |  |
| Informational resources provided to my agency were *useful*. |  |  |  |  |  |  |

**Use the open text box below provide any additional comments on these items.**

1. **Please provide the most accurate response to each of the statements below by marking (x), as it reflects the quality of CRI staff and subject matter experts who assisted your agency.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Statement** | **Strongly**  **Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly**  **Disagree** |
| CRI staff *met our expectations*. |  |  |  |  |  |
| CRI staff were *well* *informed about the process.* |  |  |  |  |  |
| CRI staff were *responsive throughout the process*. |  |  |  |  |  |
| CRI staff were *well-organized and prepared* throughout the process. |  |  |  |  |  |
| CRI subject matter experts *met our expectations.* |  |  |  |  |  |
| CRI subject matter expert(s) had *expertise* relevant to our *problem*. |  |  |  |  |  |
| CRI subject matter expert(s) had *expertise* relevant to our *agency*. |  |  |  |  |  |
| CRI subject matter expert(s) were *well-organized* and *prepared* throughout the process. |  |  |  |  |  |

**Use the open text box below provide any additional comments on these items.**

1. **Please provide the most accurate response to each of the statements below by marking (x), as it reflects your overall experience with CRI.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Statement** | **Strongly**  **Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly**  **Disagree** |
| Overall, the assistance provided met my agency’s expectations. |  |  |  |  |  |
| Overall, the assistance provided was *relevant to the problem*. |  |  |  |  |  |
| Overall, the assistance provided was *relevant to my* *agency.* |  |  |  |  |  |
| Overall, the assistance provided will help my agency address its problem. |  |  |  |  |  |

**Use the open text box below provide any additional comments on these items.**

**In your own words, please take the time to provide qualitative feedback on the technical assistance your agency received below.**

1. **Do you believe this technical assistance will help to improve your agency? Why or why not?**
2. **Have you seen any specific outcomes because of the technical assistance provided?**
3. **Does your agency have follow-up plans for organizational changes as a result of the TA provided? If so, please describe. If no, why not?**
4. **Do you have any additional feedback on your technical assistance experience?**

The technical assistance to your agency was provided through a Cooperative Agreement with the Office of Community Oriented Policing Services (COPS Office). If you have any questions or concerns about your technical assistance experience or this survey, please contact the COPS Office at [technicalassistance@usdoj.gov](mailto:technicalassistance@usdoj.gov).

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control Number. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of Community Oriented Policing Services, 145 N Street, NE Room 11E.508 Washington DC 20530 and reference the OMB Control Number 1103-0117.