CITY OF ST. LOUIS
NEIGHBORHOOD STABILIZATION TEAM (NST)
Neighborhood Improvement Specialists (NISs)

CUSTOMER SATISFACTION SURVEY

1. If you called/Emailed your NIS, were you contacted in a timely manner?

   ☐ 5 (very timely)   ☐ 4   ☐ 3   ☐ 2   ☐ 1 (not timely)

2. How would you rate the customer service you received from the NIS?

   ☐ 5 (very satisfied)   ☐ 4   ☐ 3   ☐ 2   ☐ 1 (not satisfied)

3. If you contacted or visited our office, how would you rate the customer service received from NST office personnel?

   ☐ 5 (very satisfied)   ☐ 4   ☐ 3   ☐ 2   ☐ 1 (not satisfied)

4. How would you rate the quality of information provided by the NST staff?

   ☐ 5 (very satisfied)   ☐ 4   ☐ 3   ☐ 2   ☐ 1 (not satisfied)

5. Was the NST staff courteous and helpful?

NISs	Office Staff	Manager
☐ 5 (very)	☐ 5 (very)	☐ 5 (very)
☐ 4	☐ 4	☐ 4
☐ 3	☐ 3	☐ 3
☐ 2	☐ 2	☐ 2
☐ 1 (not at all)	☐ 1 (not at all)	☐ 1 (not at all)

6. OVERALL, how would you rate your satisfaction with the NST?

   ☐ 5 (very satisfied)   ☐ 4   ☐ 3   ☐ 2   ☐ 1 (not satisfied)

7. Did any employee stand out for recognition in your experience with the NST?
   Employee Name:
   Comments:

8. Do you have any suggestions for improving NST service?

Thank you for completing our survey. Your comments are important and appreciated.

Please return this survey to

The Neighborhood Stabilization Team
C/O Dotti Pennington, Director
1520 Market Street, Room 4000
St. Louis, MO 63103

Please complete the items below so that we may follow up on your comments or suggestions in order to improve our customer service:

Name: _____

Address: _____

_____

Phone: _____ (Optional)

Email: _____ (Optional)