



# Customer Feedback Form

Thank you for visiting a branch of the Innisfil Public Library. Your feedback is important to us. By answering the following questions you will help our organization to better assist you.

1	Date, time and place you visited:	
2	Did we respond to your customer services needs today?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Was our customer service provided to you in an accessible manner?	<input type="checkbox"/> Yes <input type="checkbox"/> Somewhat (Please explain below) <input type="checkbox"/> No (Please explain below)
4	Did you encounter any problems in accessing our goods and services?	<input type="checkbox"/> Yes (Please explain below) <input type="checkbox"/> Somewhat (Please explain below) <input type="checkbox"/> No

The Innisfil Public Library Board welcomes your comments:

Thank you.

