



**Trail Association for Community Living**

**COMMUNITY STAKEHOLDER SATISFACTION SURVEY**

This survey is designed for community partners who have a relationship with TACL. We would like your input as to how well we are doing in supporting you, as well as the individuals we serve. This survey is confidential. All responses will be collected and combined into a summary report. Your name will not be used in reporting the results.

When you have completed your survey, please return to the Trail Association for Community Living within five working days .

Please read each question carefully and check (v) the corresponding answer that best reflects how you feel about TACL.

What is your relationship to TACL? \_\_\_\_\_

Section 1: The Organization		Rating			COMMENTS
		Y	N	?	
<i>Ex.</i>	<i>This is a survey regarding TACL.</i>	v			
1.	Are you aware of the services/programs that TACL provides?				
2.	I know the process to express any ideas, feedback or concerns that I may have about TACL.				

Section 2: Level of Service and Professionalism		Rating			COMMENTS
		Y	N	?	
1.	Your feedback or a matter you communicated to TACL was handled in a timely manner and by the appropriate person.				
2.	TACL staff have been professional and respectful in their dealings with you and in their work/involvement with the individuals they serve.				

Section 3: Overall Satisfaction		Rating			COMMENTS
		Y	N	?	
1.	Is there anything else TACL can do to help the community be more welcoming, accepting and respectful of the individuals that we serve?				
2.	Would you recommend TACL services to others who might need it?				
3.	Do you have any additional comments or suggestions that may improve the services we provide at TACL?				

**Thank you for your participation!**