

State Attorney's Office Victim Services ~ Client Satisfaction Survey

We are interested in any feedback you can provide about the victim services you received following the crime that was committed against you, your property, or a family member. Your honest, critical feedback is appreciated.

<p>Did a Victim Advocate work with you?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> If Yes, Advocate's Name: _____</p> <p>Did anyone else help you with Victim Services? <small>(check all that apply)</small></p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Police Department or Sheriff's Office</p> <p><input type="checkbox"/> Another Victim Services Program. If so, which one? _____</p> <p><input type="checkbox"/> Friend</p> <p><input type="checkbox"/> Family Member</p> <p><input type="checkbox"/> Minister/Pastor/Rabbi</p> <p><input type="checkbox"/> Other: _____</p> <p>What were your needs following the crime? <small>(check all that apply)</small></p> <p><input type="checkbox"/> Counseling</p> <p><input type="checkbox"/> Case Status Information</p> <p><input type="checkbox"/> Information about Victims' Rights</p> <p><input type="checkbox"/> Information about the Criminal Justice System</p> <p><input type="checkbox"/> Having someone attend testimony or court with me</p> <p><input type="checkbox"/> Help with obtaining a restraining order (or injunction for protection)</p> <p><input type="checkbox"/> Intervention with my employer or landlord</p> <p><input type="checkbox"/> Applying for Victim Compensation</p> <p><input type="checkbox"/> Requesting Restitution</p> <p><input type="checkbox"/> Other: _____</p>	<p>Were you satisfied with the type and frequency of services you received from the Victim Advocate?</p> <p><input type="checkbox"/> Very Satisfied</p> <p><input type="checkbox"/> Satisfied</p> <p><input type="checkbox"/> Neither Satisfied or Dissatisfied</p> <p><input type="checkbox"/> Dissatisfied</p> <p><input type="checkbox"/> Very Dissatisfied</p> <p>Were you satisfied with the contact you had with the Prosecutor?</p> <p><input type="checkbox"/> Very Satisfied</p> <p><input type="checkbox"/> Satisfied</p> <p><input type="checkbox"/> Neither Satisfied or Dissatisfied</p> <p><input type="checkbox"/> Dissatisfied</p> <p><input type="checkbox"/> Very Dissatisfied</p> <p>Was there anything confusing about the Victim Services you were offered?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> If Yes, please explain:</p>
<p>Any additional feedback you would like to provide would be greatly appreciated:</p> <hr/>	

Thank you.

Your name _____ (Optional, your name is NOT necessary)

Please return to:
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