

# Counseling Session Evaluation

Consumer Credit Counseling Service of the Miami Valley (CCCS) is committed to providing quality service to our clients. Please take a moment to complete this evaluation and return it to CCCS. Your responses are confidential.

Date: \_\_\_\_\_ Counselor: \_\_\_\_\_

**Ratings: Very Poor: 1 Poor: 2 Fair: 3 Good: 4 Very Good: 5**

**Instructions:** Circle the number that best describes your experience.

- |     |   |   |   |   |   |   |
|-----|---|---|---|---|---|---|
| 1.  | How would you rate your overall satisfaction with CCCS services?  | 1 | 2 | 3 | 4 | 5 |
| 2.  | How would you rate the likelihood of recommending us to others who need our services?   | 1 | 2 | 3 | 4 | 5 |
| 3.  | How would you rate the courtesy of the CCCS staff?  | 1 | 2 | 3 | 4 | 5 |
| 4.  | How would you rate the extent to which our employees treat you with respect and dignity?  | 1 | 2 | 3 | 4 | 5 |
| 5.  | Rate the amount of time it took to arrange an appointment.  | 1 | 2 | 3 | 4 | 5 |
| 6.  | Rate the convenience and accessibility of the location.   | 1 | 2 | 3 | 4 | 5 |
| 7.  | How would you rate the counselor's knowledge and information provided?  | 1 | 2 | 3 | 4 | 5 |
| 8.  | Rate how well the session helped you to fully understand your rights and responsibilities and the consequences of your options. | 1 | 2 | 3 | 4 | 5 |
| 9.  | Do you now have a better understanding of the importance of savings?  | 1 | 2 | 3 | 4 | 5 |
| 10. | Rate how well the session helped you to have a better understanding of your financial situation.                                | 1 | 2 | 3 | 4 | 5 |
| 11. | Did you learn skills you could use to avoid future money problems?  | 1 | 2 | 3 | 4 | 5 |
| 12. | Rate the benefit the session had for you in achieving your financial goals.   | 1 | 2 | 3 | 4 | 5 |

Comments or suggestions for improvement: