



**VOCATIONAL COUNSELING & CBA SERVICES
CLIENT SATISFACTION SURVEY**

Please return this Satisfaction Survey back to Dirkse Counseling & Consulting, Inc. (DCC) to the address or fax number in the top right hand corner of this survey. Optionally, you may also submit by email. Your input is very important and valuable so we better serve you and others who ask for help.

Client Name (Optional): _____ Year of Service: _____

Participated in a Community Based Assessment:

____ Yes ____ No

START SURVEY HERE:

Please check off your main reasons for getting help:

____ Finding out what kinds of jobs are a good fit and available in my area

____ Finding out my vocational interests and/or my personality

____ Finding out my areas of limitation and accommodations that might help me be successful at work

____ Finding out what other kinds of services might help me to go to work

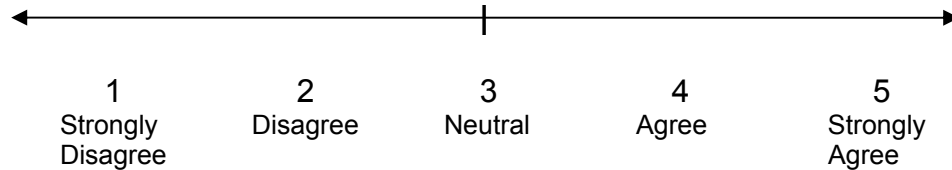
____ So I can participate in a community-based on-the-job try-out

____ So I can see what different types of jobs are like before I apply

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Please rate your agreement or disagreement with the statements below using this scale:



- _____ I was provided with information to help me decide if the services at DCC would help me meet my needs.
- _____ When I asked for help with non-work needs DCC helped me or referred me to someone or an organization that could help.
- _____ My case manager explained what we would be doing and I gave input
- _____ My vocational interests and preferences were explored and identified
- _____ My case manager and I identified how my disability might affect my ability to work and we worked on removing any barriers to it
- _____ My case manager was available when I needed him/her and the places we met were easy to get around in.
- _____ I believe that these services helped me to continue moving toward my goal of employment.
- _____ I would recommend services from DCC to a friend.

Please explain why you might not agree with any of the statements above:
