

ADDICTIONS RESOURCE CENTER, INC.

State of Ohio Certified O.V.I. / Remedial Driving Programs PO Box 807 – Yellow Springs, OH 45387

Phone: (937) 767-0178 Fax: (937) 767-0199 Executive Director: W.L. Thomas PsyD. MRC, LICDC-CS, ICRC

CLIENT SATISFACTORY SURVEY

DIRECTIONS: In order to improve the quality of services provided by our agency, please circle yes or no for each of the following questions about the services you received. Please add comments about any question in the spaces provided.

1. Was the registration process timely and convenient for you?	Yes	No
2. Were the services provided to you what you expected?	Yes	No
3. If applicable, are you satisfied that your service providers were culturally a sensitive? (please elaborate)	ware and Yes	
4. Would you recommend our services to others?	Yes	No
5. Overall were you satisfied with the services you received?	Yes	No
*Please include suggestions for improving our program. Use additional sheet if need	ed.	

THANK YOU