CLIENT SERVICE SURVEY

We thank you for letting us help you with your legal needs. Please complete and submit this Survey by email to ltc@uw.edu OR by mail to: Federal Tax Clinic, University of Washington School of Law, William H. Gates Hall, Suite 265, P.O. Box 85110, Seattle, WA 98145-1110.

Our goal is to provide high quality, professional legal services to our clients. By answering this Survey you will help us find out if we are meeting our goal. The Survey should take about four minutes to complete.

Doing this Survey is voluntary. You do not have to tell us who you are. Whether or not you complete the Survey has nothing to do with our helping you in the future. Only a few reviewers in the Federal Tax Clinic will have access to your confidential answers; answers will not be released to anyone else.

1. How did you find out about the Federal Tax Clinic?

Comments: ________________________________________________________________

_____________________________________________________________________________.

2. The Federal Tax Clinic person(s) who helped you:

______________________________________________________________________________

______________________________________________________________________________

Please answer the questions below by circling the number that best fits your opinion:

Excellent  Good  Average  Fair  Poor

3. Your experience with the Federal Tax Clinic overall was:

Comments: ________________________________________________________________

_____________________________________________________________________________.

4. The service we provided you was:

Comments: ________________________________________________________________

_____________________________________________________________________________.

5. We explained your legal options and allowed you to make decisions:

Comments: ________________________________________________________________

______________________________________________________________________________.
6. We stayed in touch with you about your case:

Comments: ________________________________________________________________

7. The legal work we did for you was:

Comments: ________________________________________________________________

8. We responded to your phone calls and other contacts promptly:

Comments: ________________________________________________________________

9. Would you return to us for help with your legal needs in the future?

Comments: ________________________________________________________________

10. Would you recommend the Federal Tax Clinic to others who have legal needs?

Comments: ________________________________________________________________

11. Please tell us anything else you think is important:

Comments: ________________________________________________________________

12. If you would like to be contacted based on any of your above answers, please tell us how you would like to be contacted:

Comments: ________________________________________________________________

Name (not required): _________________________________ Date: __________________

YOUR FEEDBACK WILL HELP US TO FURTHER IMPROVE THE FEDERAL TAX CLINIC.
THANK YOU FOR COMPLETING THIS SURVEY!