



EMPLOYER SATISFACTION SURVEY
Supported Employment
FY 2007/2008

Employer Representative _____ Date

Employer/Company Name

Address/Phone

CIS Consumer(s) Employed

Job Coach _____ CIS Surveyor

1. Did Community Interface Services provide you with a qualified applicant/s? _ Yes _
No

2. Did we do a good job educating you about our job seekers and our services? _ Yes _
No

3. Has the employee/s developed positive relationships with your other employees? _ Yes _ No

4. Have you had positive interactions with Community Interface's supervisory staff? _ Yes _ No

5. Have you had productive interactions with Community Interface's job coaches? _ Yes _ No

6. Do we do a good job of providing supports/services to the employee/s? _ Yes _ No

7. Are supports/services provided at a time that is convenient to you? _ Yes _ No

8. Are you satisfied with your employee/s and our services? _ Yes _ No

9. Have you received all the information you need about:
-on-site job analysis _ Yes _ No _ Not applicable/not needed
-disability awareness training _ Yes _ No _ Not applicable/not needed
-reasonable accommodations _ Yes _ No _ Not applicable/not needed

10. What do you like best about our services?

11. Do you have any suggestions for improvements?

12. Tell us about your future employment needs/trends. What can we do to help meet those needs?

Thank you for taking the time to give us feedback. Please return this survey by mail, fax, or hand delivery to any CIS staff person.

FOLD HERE FOR MAILING



Community Interface Services
2621 Roosevelt Street
Carlsbad, CA 92008-1660

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DO NOT STAPLE - PLEASE TAPE