**We are committed to providing our customers with the highest quality data, services, and customer care. Your feedback is very important to us.**

**Please take a moment to complete the project information and survey below and email to the project contact or** [**service@forteanalytical.com**](mailto:service@forteanalytical.com)**.**

|  |  |
| --- | --- |
| **Project Contact Name** |  |
| **Project Name/Details** |  |
| **Project Initiation Date (Optional)** |  |
| **Project Completion Date (Optional)** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Please rate the quality of the service you received during project initiation. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  |  |  |  |  |
| Please rate the quality of the service you received during the project. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  |  |  |  |  |
| Please rate the quality of the service you received during the project closeout. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  |  |  |  |  |
| Please rate the quality of the data/information you received. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  |  |  |  |  |
| Please rate the quality of the turnaround time you received. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  |  |  |  |  |
| Please rate the quality of the communication you received. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  | | | | |
|  |  |  |  |  |
| Please rate the ease of accessibility to information. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |
|  |  |  |  |  |
| Please rate your overall experience. | | | | |
| 1 | 2 | 3 | 4 | 5 |
| Unacceptable |  | Satisfactory |  | Exceptional |
|  |  |  |  |  |
| Comments: | | | | |

|  |  |
| --- | --- |
| Additional Comments/Concerns: |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Thank you for your support and feedback.**