**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****.**

|  |  |
| --- | --- |
| **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.**