



Client Satisfaction Survey

Name (optional)

Date

Attorney/Paralegal/Intern Name

1. How did you hear about Gulfcoast Legal Services?

Friend/Family Advertisement GLS Brochure/Materials Online
 Referred by another agency: _____

2. Overall, are you satisfied with the service you received? Yes No
If not, what can we do better?

3. If you needed legal services again, would you call our agency? Yes No

4. Would you recommend Gulfcoast Legal Services to others? Yes No
If not, please tell us why.

5. How would you rate the quality of our services?

Excellent Good Adequate Poor

6. Was your legal issue resolved within a reasonable length of time? Yes No

7. Were our staff members courteous and respectful? Yes No

8. Was there anything about our services that you did not like? Yes No

9. If you answered yes to question 8, what suggestions do you have for improving our services?

Thank you for your feedback.

