

Sample Customer Survey for Middle and High School Students

Please take a minute to give us your feedback. Your opinions are very important!

Food Choices & Quality	Very Satisfied			Not Satisfied	
Overall, how satisfied are you with the food:	1	2	3	4	5
Quality?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appearance?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taste?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temperature?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quantity?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choices?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service	Very Satisfied			Not Satisfied	
Overall, how satisfied are you with the:	1	2	3	4	5
Courtesy and friendliness of the staff?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speed of service?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cafeteria Environment	Very Satisfied			Not Satisfied	
Overall, how satisfied are you with the:	1	2	3	4	5
Cafeteria's cleanliness?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cafeteria's appearance?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cafeteria's noise level?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cafeteria's overall atmosphere?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of time available to eat?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prices	Very Satisfied			Not Satisfied	
Overall, how satisfied are you with the prices charged for:	1	2	3	4	5
Complete meals?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individually priced items?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Over please)

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Please tell us about you.

When you eat lunch at school, which items below do you usually take? (Check all that apply)

- Milk
- Fruit
- Vegetable
- Main course
- Bread
- Dessert

How often do you eat lunch provided by the school?

- Every day
- 3 or 4 days a week
- 1 or 2 days a week
- Less than once a week
- Never

How often do you bring lunch from home?

- All the time
- 3 or 4 days a week
- 1 or 2 days a week
- Less than once a week
- Never

How often do you go somewhere else for lunch besides home or school?

- All the time
- 3 or 4 days a week
- 1 or 2 days a week
- Less than once a week
- Never

What ideas or suggestions do you have for improving any aspect of the food service program at your school?

What is your name? (optional) _____

What is your grade? _____

THANK YOU!