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| [Company Name] How Are We Doing? We are committed to providing you with the best dining experience possible, so we welcome your comments. Please fill out this questionnaire and place it in the box in our lobby. Thank you. Please rate the quality of the service you received from your host. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Please rate the quality of the service you received from your server. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Was your server… Courteous?  Yes |  No  Informative?  Yes |  No  Prompt and efficient?  Yes |  No Please rate the quality of your entree. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Please rate the quality of your beverage. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Was our restaurant clean? 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Please rate your overall dining experience. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  How frequently do you visit our restaurant? 3-5 times per month  1-2 times per month  Once every 2 months  Other |  | [Company Name] How Are We Doing? We are committed to providing you with the best dining experience possible, so we welcome your comments. Please fill out this questionnaire and place it in the box in our lobby. Thank you. Please rate the quality of the service you received from your host. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Please rate the quality of the service you received from your server. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Was your server… Courteous?  Yes |  No  Informative?  Yes |  No  Prompt and efficient?  Yes |  No Please rate the quality of your entree. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Please rate the quality of your beverage. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Was our restaurant clean? 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  Please rate your overall dining experience. 1  2  3  4  5   |  |  | | --- | --- | | Disappointing | Exceptional |  How frequently do you visit our restaurant? 3-5 times per month  1-2 times per month  Once every 2 months  Other |

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| --- | --- | --- |
| [Company Name] |  | [Company Name] |
| Continued |  | Continued |
| Do you plan to return to our restaurant? Yes |  No |  | Do you plan to return to our restaurant? Yes |  No |
| Would you recommend our restaurant to a friend? |  | Would you recommend our restaurant to a friend? |
| Yes |  No |  | Yes |  No |
| Why, or why not? |  | Why, or why not? |
|  |  |  |
|  |  |  |
| If your visit was to celebrate a special occasion, how might we have made it more memorable? |  | If your visit was to celebrate a special occasion, how might we have made it more memorable? |
|  |  |  |
|  |  |  |
| What dish did you order? |  | What dish did you order? |
|  |  |  |
|  |  |  |
| What dishes would you like added to our menu? |  | What dishes would you like added to our menu? |
|  |  |  |
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| Please share any additional comments or suggestions. |  | Please share any additional comments or suggestions. |
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| [Company Name] [Address] City, ST ZIP Code  [Phone]  [Website] |  | [Company Name] [Address] City, ST ZIP Code  [Phone]  [Website] |