**DEPARTMENT OF SPORT, ARTS AND CULTURE**



**CUSTOMER SATISFACTION QUESTIONNAIRE**

The Department of Sport, Arts and Culture, in its quest to improve its services to you, humbly request that you complete this Service Delivery Improvement Questionnaire.

1. **Personal Information(optional)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name & Surname |  | Tel |  |
| Town |  | Cell |  |
| Area Of Interest  | Sports | Arts | Libraries | Service Provider | Gender |
|  |  |  |  | Male |  | Female |  |
| Age |
| 0 - 19 |  | 20 - 29 |  | 30 -39 |  | 40 – 49 |  | 50 – 59  |  | 60+ |  |

1. **Questionnaire**

|  |  |
| --- | --- |
| Do you know the Department of Sport, Arts and Culture and the location of its offices and contact numbers in your district? | In terms of service delivery, is the department visible in your area? |
| Yes |  | No |  | Yes |  | No |  |
| Are you satisfied with the level and quality of the services of the department in your community? |
|  |
|  Have you previously been a beneficiary of the services of the Department of Sport, Arts and Culture? If YES, please explain |
|  |
| In a few words please tell us what the department should do to improve its services in your community? |
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***The Department of Sport, Arts and Culture “Putting People First”***