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**Client Feedback & Evaluation Survey**

Dear [Client's Name],

We greatly value your input and insights regarding the services provided by our students as part of the Community Consultancy/Employer Rounds course. Your feedback is crucial in helping us improve and ensuring that we continue to deliver high-quality services in the future. Please take a few minutes to share your thoughts with us.

**Project Information:**

Project Name:

Student Team Name:

Rate the following on a scale from 1 (Strongly Disagree) to 5 (Strongly Agree):

*Please provide comments for any ratings below 4.*

**Communication:** How would you rate the communication between the student team and your organization throughout the project?

1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]

Comments:

**Quality of Work:** How satisfied are you with the quality of work delivered by the student team?

1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]

Comments:

**Meeting Deadlines:** Were the project milestones and deadlines met to your satisfaction?

1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]

Comments:

**Understanding of Your Needs:** How well did the student team understand and address your organization's specific marketing needs and goals?

1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]

Comments:

**Recommendations:** To what extent do you believe the recommendations and strategies provided by the student team will benefit your organization?

1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]

Comments:

**Overall Satisfaction:** Overall, how satisfied are you with the experience of working with our students on this project?

1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]

Comments:

**Open-Ended Questions:**

Please share any specific strengths of the student team or elements of the project that you found particularly valuable or well-executed.

Can you identify any areas where there is room for improvement or where you believe the project could have been enhanced?

How likely are you to engage in another project with our course in the future?

**Additional Comments:**

Please use this space to provide any additional comments, suggestions, or feedback regarding your experience working with our students.

Your feedback is invaluable to us, and we thank you for taking the time to complete this survey. Your responses will be treated confidentially and used solely for the purpose of our course improvement.

Sincerely,

[Instructor’s Name]

[Instructor’s Contact Info]