



**COLORADO**  
Weatherization Assistance Program

## WAP Customer Satisfaction Survey 1

Please complete the following survey to help the Colorado Weatherization Assistance Program (WAP) Network to better understand our clients and improve WAP across our beautiful state. Your input is very important to us!

\* 1. What county do you live in?

\* 2. How would you rate the **customer service** (interaction with staff, information provided, clear communication, timeliness) you received in the following areas:

	1 - Unsatisfactory	2 - Below Expectations	3 - As Expected	4 - Above Expectations	5 - Outstanding
Application process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Scheduling process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initial audit and evaluation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work performed for your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inspection after the work was completed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 3. How would you rate your satisfaction in the following areas:

	0 - To Be Determined	1 - Unsatisfactory	2 - Below Expectations	3 - As Expected	4 - Above Expectations	5 - Outstanding
The weatherization service provider	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The work that was done for your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduction in your energy bill(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comfort level of your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health and safety of your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 4. How would you rate your overall weatherization experience?

- ☐ 1 - Unsatisfactory
- ☐ 2 - Below Expectations
- ☐ 3 - As Expected
- ☐ 4 - Above Expectations
- ☐ 5 - Outstanding

\* 5. What's your email address?

6. Optional: Please provide us with any other comments or suggestions you may have.

7. Optional: With what race do you identify?

- ☐ African American and/or Black
- ☐ Asian
- ☐ American Indian, Alaska Native, or First Nations Persons
- ☐ Native Hawaiian or Pacific Islander
- ☐ White
- ☐ Two or more races
- ☐ Another race not named here

8. Optional: With what ethnicity do you identify?

- ☐ Hispanic, of any race
- ☐ Non-Hispanic, White
- ☐ Non-Hispanic, Not White
- ☐ Another ethnicity not named here

9. Optional: With what gender do you identify?

- ☐ Male
- ☐ Female
- ☐ Gender Non-Conforming
- ☐ Non-Binary
- ☐ Transgender
- ☐ Two Spirit
- ☐ Another gender not named here

Thank You!

We appreciate you taking the time to help us better serve Coloradans. Please remember to let your friends, family, and neighbors know about how Colorado WAP can help! <https://energyoffice.colorado.gov/weatherization-assistance-program>