Informal Feedback Form

# Instructions

1. Use the sample form below or adapt it to meet your needs.
2. Include the following pieces of information:
	* Date
	* Time (approximate is fine or just morning/afternoon)
	* Name of client providing the feedback, if known. You can use first name only, first name and first initial of last name, or any other style you feel comfortable with.
	* Feedback received.
	* Context and/or additional notes.
3. Who should record this information?
	* Ideally, all staff in the agency should use this form to record verbal feedback as it is received.

# Client Feedback Notes

**Worker Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DATE** | **TIME** | **Name of client**  | **Feedback provided** | **Program / Service to which the feedback relates** | **Context / Additional Notes** |
| *June 12, 2014* | *3:00pm* | *Nina S.*  | *No one listens to me here. I never get the support I need.*  | *Support services*  | *Nina had walked in wanting to see her worker right away. She was told she needed to wait for 15 min until the worker ended their other appt.*  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |