

Hotel - Customer Satisfaction

BACKGROUND INFORMATION

Date: _____

Age: ☐ 0-14 ☐ 15-24 ☐ 25-34
☐ 35-44 ☐ 45-54 ☐ 55-64
☐ 65-74 ☐ 75-84 ☐ 85-

Gender: ☐ male ☐ female

Country: _____

How did you find out about the service?
 You can select at most 10 options

- | | | |
|--|--|---|
| <input type="checkbox"/> From the Internet: company website | <input type="checkbox"/> From the Internet: search engine, please specify: | <input type="checkbox"/> From the Internet: social networking sites and discussion groups (IRC, Facebook, Tripsay.com, Suomi24, etc.) |
| <input type="checkbox"/> Friends, acquaintances, relatives | <input type="checkbox"/> Brochures | <input type="checkbox"/> Newspapers and local papers |
| <input type="checkbox"/> TV/Radio | <input type="checkbox"/> Tourism information service | <input type="checkbox"/> Personal experiences |
| <input type="checkbox"/> Elsewhere, please specify: | | |
| <input type="checkbox"/> Other, what? | _____ | |

Purpose of the trip:

- | | | |
|--|----------------------------------|-------------------------------------|
| <input type="checkbox"/> business | <input type="checkbox"/> leisure | <input type="checkbox"/> passing by |
| <input type="checkbox"/> other | | |
| <input type="checkbox"/> please specify: | _____ | |

Please answer the questions below using the following scale

😊 = very good, 😞 = very poor, ? = no experience













General factors

| | 😊 | 😊 | 😊 | 😊 | 😊 | ? |
|----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Pleasantness in general | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tidiness in general | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Staff willingness to serve | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Staff expertise | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Availability of service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Accommodation

| | 😊 | 😊 | 😊 | 😊 | 😊 | ? |
|----------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| General appearance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tidiness of the room | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Restaurant

| | | | | | | |
|--|---|---|---|---|---|---|
| |  |  |  |  |  |  |
| Food | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The appearance and pleasantness of the restaurant premises | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| |  |  |  |  |  |  |
| Your general opinion | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Price-quality ratio | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| How did we fulfil your expectations? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Yes
 ☐ No

 Why not: _____

☐ Yes
 ☐ No

 Why: _____

What was the best of all?

How would you improve our operation?

Contact details:

☐ Yes
 ☐ No

Thank you for your comments!