

Free Restaurant Survey Form

1. Customer Information

- Full Name: _____
- Date: _____
- Time: _____
- Server's Name: _____

2. Dining Experience

- Overall Food Quality: Excellent Good Fair Poor
- Flavor: Excellent Good Fair Poor
- Presentation: Excellent Good Fair Poor

3. Service Experience

- Staff Courtesy: Excellent Good Fair Poor
- Service Speed: Excellent Good Fair Poor
- Attentiveness: Excellent Good Fair Poor


4. Cleanliness

- Dining Area Cleanliness: Excellent Good Fair Poor
- Restroom Cleanliness: Excellent Good Fair Poor
- Overall Cleanliness: Excellent Good Fair Poor

5. Value for Money

- Meal Pricing: Excellent Good Fair Poor
- Portion Sizes: Excellent Good Fair Poor

6. Specific Comments

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- Favorite Dish: _____
 - Suggestions: _____

7. Overall Rating

- Overall Experience: Excellent Good Fair Poor

8. Additional Feedback

- Comments: _____