**Employee Survey Questionnaire Form**

**Basic Details:
Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Survey Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Questionnaire Table:**

| **Question** | **Yes** | **No** | **Comments** |
| --- | --- | --- | --- |
| **Do you feel motivated at work?** | **[ ]** | **[ ]** |  |
| **Are your responsibilities clear?** | **[ ]** | **[ ]** |  |
| **Do you have adequate resources to work?** | **[ ]** | **[ ]** |  |
| **Are you satisfied with the leadership?** | **[ ]** | **[ ]** |  |
| **Would you recommend this organization?** | **[ ]** | **[ ]** |  |

**Suggestions for Improvement:**

**Your Overall Rating:**

| **Rating Scale (1 to 5)** | **1 (Poor)** | **2** | **3 (Average)** | **4** | **5 (Excellent)** |
| --- | --- | --- | --- | --- | --- |
| **Overall Satisfaction** | **[ ]** | **[ ]** | **[ ]** | **[ ]** | **[ ]** |

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**