CID­#

Please take a few minutes to share your feedback about your experiences working with the Division of Vocational Rehabilitation (DVR). Your feedback is important in improving the vocational rehabilitation process.

1. **My DVR Office was:**

Wilmington Office

Pencader or Middletown Office

Dover or Milford Office

Georgetown Office

1. **The quality of my relationship with my vocational rehabilitation counselor was:**

Excellent

Very Good

Good

Fair

Poor

Very Poor

1. **My satisfaction with the opportunity to choose my vocational rehabilitation goal and services is:**

Very Satisfied

Somewhat Satisfied

Neutral

Somewhat Dissatisfied

Very Dissatisfied

1. **My satisfaction with the job that I found during the process of working with DVR is:**

Very Satisfied

Somewhat Satisfied

Neutral

Somewhat Dissatisfied

Very Dissatisfied

1. **I will come back to DVR if I need additional employment services:**

Very likely

Somewhat likely

Neutral

Somewhat unlikely

Very Unlikely

1. **Overall, my satisfaction with DVR is:**

Very Satisfied

Somewhat Satisfied

Neutral

Somewhat Dissatisfied

Very Dissatisfied

**(please turn to other side to add any comments or suggestions)**

1. **Please provide any additional comments about your experience with DVR.**

**Thank you for participating in this survey. Your input is valuable.**