

Graduate Student Exit Evaluation

The Office of Graduate Programs (OGP) would appreciate your feedback regarding our performance. Please take a little time to complete this questionnaire. Your cooperation is greatly appreciated. HELP US HELP YOU! Thank you! 😊

Name: _____
 Major: _____ Acad Unit: _____
 Advisor: _____

SSN: _____
 Grad Date _____ (Mo/Year)
 Degree: _____

- | | | | | | | |
|--|-------|-----|-------|-----|-------|-----------|
| 1. Did your Academic Unit / Advisor refer you to us? | _____ | Yes | _____ | No | | |
| 2. Did you check in with the OGP when you <u>first</u> started work? | _____ | Yes | _____ | No | | |
| 3. If NO, when did you go to the OGP for a pre-check? | | | | | | |
| 4. Did you find the service received satisfactory? | _____ | Yes | _____ | No | _____ | Somewhat |
| 5. Approximately how many visits did you make? | _____ | 1-3 | _____ | 4-6 | _____ | 7 or more |
| 6. Did you purchase the Thesis Style Manual? | _____ | Yes | _____ | No | | |
| 7. Was it helpful? | _____ | Yes | _____ | No | _____ | Somewhat |
| 8. Did you attend any of the Word Processing Seminars? | _____ | Yes | _____ | No | | |
| 9. Was it helpful? | _____ | Yes | _____ | No | _____ | Somewhat |

Please evaluate how the OGP staff was able to help you in the following areas	Low				Med			High
10. Helpfulness	1	2	3	4	5	6		
11. Knowledge	1	2	3	4	5	6		
12. Accessibility	1	2	3	4	5	6		
13. Communication	1	2	3	4	5	6		
14. Follow-up	1	2	3	4	5	6		

Suggested Improvements:

Please use the space below for additional comments:
