
OMBUDS CONSULT FEEDBACK QUESTIONNAIRE

Please help us evaluate the effectiveness of the University of Virginia's Ombuds office. For each question, check the response that best describes your thoughts and feelings. Answer honestly knowing that your input is intended to help improve the program. Thank you for taking the time to complete the questionnaire.

The following questions concern your experience during your consultation with the University Ombuds. Please tell us how satisfied you are:

1. I am satisfied with the overall consultation experience.

Strongly Agree Agree Uncertain Disagree Strongly Disagree

2. I am satisfied with the overall length of time I was given during my consultation(s) to talk about the issues that I felt were important.

Strongly Agree Agree Uncertain Disagree Strongly Disagree

3. I am satisfied that my concerns were heard and understood by the University Ombuds.

Strongly Agree Agree Uncertain Disagree Strongly Disagree

4. I am satisfied with the options and/or informal resources that were provided to me for resolving my concerns.

Strongly Agree Agree Uncertain Disagree Strongly Disagree

5. I am satisfied with the overall confidentiality of the consultation process.

Strongly Agree Agree Uncertain Disagree Strongly Disagree

6. What did you like the most and/or the least about your ombuds consultation?

Upon completion, please return this questionnaire to the University Ombuds Office.

Email: ombuds@virginia.edu

Mailing Address: 315 Old Ivy Way, Suite 203, P.O. Box 400219, Charlottesville, VA 22903

Thank you for your input. We value your opinion.