

Freedom of Information Customer Satisfaction Survey

Bolsover
District Council

Providing excellent customer focused services



The purpose of this survey is to find out what is **important** or **unimportant** to you and how **satisfied** or **dissatisfied** you are as a customer who has made a Freedom of Information request. This information will enable us to make improvements to those areas that matter the most. The survey will take less than 10 minutes to complete.

Section A - Importance

To help us understand which aspects of the Freedom of Information service are most important to you, please read through the list below and place an 'X' in the appropriate box using the scoring guide as follows:

1 = 'extremely unimportant' and 10 = 'extremely important'

It may be useful to read through the list first before completing the boxes.

	Extremely unimportant							Extremely important		
	1	2	3	4	5	6	7	8	9	10
1. Being able to make a freedom of information request easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Having information on freedom of information available on the website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Receiving a written acknowledgement of your request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Having contact details for assistance whilst your request is being processed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Received a clear and understandable written response to your request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Knowing what to do if you are dissatisfied with the information you receive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Being treated fairly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Length of time to receive a response to your request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is there an important requirement we have missed? If so, please note it down in the space below for future consideration.

EQUAL SERVICES FOR ALL MEANS FAIRNESS FOR ALL



Help us to be fair to everybody no matter what their situation.
We will only use this information to check if we are providing fair services to everybody. This information is totally confidential.
You don't have to fill in this page but if you do it will help us to help you.

ARE YOU?		Racial discrimination is wrong!	
WHITE		BLACK OR BLACK BRITISH	
British	<input type="checkbox"/>	Black Caribbean	<input type="checkbox"/>
Irish	<input type="checkbox"/>	Black African	<input type="checkbox"/>
Any other white background	<input type="checkbox"/>	Any other Black background	<input type="checkbox"/>
MIXED		ASIAN OR ASIAN BRITISH	
White and Black African	<input type="checkbox"/>	Indian	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
White and Black Caribbean	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Any other mixed background	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>
CHINESE		OTHER	
Chinese	<input type="checkbox"/>	Any other ethnic background	<input type="checkbox"/>
ARE YOU?		Sex discrimination is wrong!	
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>

ARE YOU DISABLED?		Disability discrimination is wrong!	
The definition of disability in the Disability Discrimination Act 1995 is: "A physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day to day activities"			
Do you consider yourself to be disabled?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

HOW OLD ARE YOU?		Age discrimination is wrong!	
Please state your date of birth:			
	d d	m m	y y y y
	<input type="text"/>	<input type="text"/>	<input type="text"/>

WHAT RELIGION ARE YOU?		Discrimination because of religion is wrong!	
<input type="checkbox"/> Christian	<input type="checkbox"/> Buddhist	<input type="checkbox"/> Hindu	<input type="checkbox"/> Jewish
<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh	<input type="checkbox"/> Any other religion	<input type="checkbox"/> No religion at all

SEXUALITY		Discrimination because of a person's sexuality is wrong!	
<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Gay	<input type="checkbox"/> Lesbian	<input type="checkbox"/> Bisexual

THANK YOU FOR FILLING IN THIS FORM.
PLEASE POST IT IN THE ENVELOPE PROVIDED