



elegant profile

Name: \_\_\_\_\_

Date of Service: \_\_\_\_\_

Your satisfaction is important to us. Please help us improve our service by completing the form below. For each of the following statements, simply Circle the Word that corresponds to the strength of your opinion, and then return this form to Elegant Profile in the envelope provided. We appreciate your business and loyalty.

I received enough information about product selections and care to make an informed choice:

- Excellent**
- Above Average**
- Average**
- Below Average**
- Poor**

My CFm responded quickly to my questions and concerns:

- Excellent**
- Above Average**
- Average**
- Below Average**
- Poor**

Fitting appointment was held on time, at my convenience, and in a private setting:

- Excellent**
- Above Average**
- Average**
- Below Average**
- Poor**

Were your goals achieved?

- Yes**    **No**

What did you like best about our service?

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I was treated with courtesy, sensitivity, and my Certified Mastectomy Fitter (CFm) made an effort to understand my special needs:

- Excellent**
- Above Average**
- Average**
- Below Average**
- Poor**

What can we do to improve our service?

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My CFm was knowledgeable about the products, competent, and professional:

- Excellent**
- Above Average**
- Average**
- Below Average**
- Poor**

CFm :

- Kathy Stanley
- Vicki Gatwood
- Kim Bullins