



SATISFACTION SURVEY

Your opinion is very important to us.

To continue to improve our service and the conditions of the Museum Nucleus, please answer the following questions by marking with an "X" in the field corresponding to your opinion:

1 – In general terms, how do you classify the organization of the Museum Nucleus?

Excellent	<input type="checkbox"/>
Very Good	<input type="checkbox"/>
Good	<input type="checkbox"/>
Reasonable	<input type="checkbox"/>
Weak	<input type="checkbox"/>

2 - What is your opinion about the Museum Nucleus's space?

	General Aspect	Accesses	Cleaning	Security
Excellent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very Good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reasonable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remarks:

3 - Do you agree with the Museum Nucleus's operation hours?

Yes	<input type="checkbox"/>	If you think the adopted operation hours should be changed, please indicate which ones
No	<input type="checkbox"/>	

4 - The contents of the Museum Nucleus's exhibition are?

Excellent	<input type="checkbox"/>	If you think the contents should be improved or we need more interactive teaching equipment, please indicate which ones:
Very Good	<input type="checkbox"/>	
Good	<input type="checkbox"/>	
Reasonable	<input type="checkbox"/>	
Weak	<input type="checkbox"/>	

5 - How do you classify the guided visits to the exhibitions?

	General Aspect	Cleaning	Security	Accesses
Excellent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very Good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reasonable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6 - What is the degree of satisfaction regarding the support provided by the employee during your visit to the Museum Nucleus?

Completely satisfied
Very satisfied
Satisfied
Poorly satisfied
Not satisfied at all

7 - Would you return to the Museum Nucleus?

Yes
No

8 - Would you recommend this Museum Nucleus to others?

Yes
No

9 - If you wish to leave other suggestions or remarks, please indicate:

_____, on ___/___/20__

(Signature)

This information is optional:

Name: _____

Mobile Phone: _____

Email: _____

Thank you for your attention.

We appreciate the return of this survey, duly completed, to the Museum Nucleus's employee.