Tell us how we're doing!

Please leave us a note about your experience at NC State Bookstores so that we may better serve you in the future. Your comments are appreciated!

	$A = VERY GOOD \mid D = VERY BAD$				
Staff was PROFESSIONAL	Α	В	С	D	
Staff was FRIENDLY	А	В	С	D	
Staff was HELPFUL	А	А В С			
Product SELECTION satisfied my needs		В	C	D	
Sales floor was neat and WELL STOCKED	Α	В	C	D	
OVERALL I give this store a grade of	Α	В	· C	D .	

Additional Comments or Suggestions (use other side)



THE PLACE TO MEET.

At Crowne Plaza Irvine we strive to exceed your expectations throughout each visit. Please take a few seconds to tell us about your stay.

Based on your experience, please rate your satisfaction with the following:

,		Somewhat Satisfied	Neither Satisfied or Dissatisfied	Somewhat Dissatisfied	Very Dissatisfied	Did Not Use
Friendliness of Staff						
Responsiveness to Your Needs						
Service at Check-In						
Cleanliness of Guest Room						
Professional Attitude & Appearance						
Hotel Safety & Security						
Overall Service Received at This Hotel						
Overall Physical Condition of This Hote	l					
Value Received						
Overall Satisfaction						
		Yes			No	
Would you recommend this hotel?						
Are you a Priority Club Member?						
Did everything in your room work?						
If no, what items were not wo	rking? (Mark all that apply)					
Heater / Air Conditioning	Phone / Internet			Lighting		
TV / Remote / Radio	Bathroom Facilities			Other		
Purpose of Stay?						
Pleasure	Business		G	roup Meetin	g / Event a	Hotel
Please tell us one thing that made	a difference during your sta	ay:				
Outstanding Employees:						
Name:		Room Nur	nber:			
Date of Departure:		Group:				

Dear Patient/Patient Family

Your name:_
(optional)

The UCLA Department of Anesthesiology is pleased to have the opportunity to care for you. We would like to give you the best care possible. We would appreciate it if you could participate in the evaluation of our attending and resident physicians. Please take a moment to complete and return this evaluation to us.

evaluation to us.							
Thank you.							
Patricia A. Kapur, M.D.							
Professor & Chair							
Date of Surgery:	_						
Resident Anesthesiologist:				_			
	Strongly			Do Not			
Patient/Patient Family	Agi	Agree			Agree		
	5	4	3	2	1		
Introduced him/herself							
Courteous							
Conducted him/herself in a professional manner							
Explained anesthesia care plan and risks				\Box			
Answered my questions							
		•					
Business Card Provided:YES		NO					
Comments:							

PATRICIA A. KAPUR, M.D. Department of Anesthesiology University of California Box 957403 Los Angeles, CA 90095-7403

feedback

it's important to us!

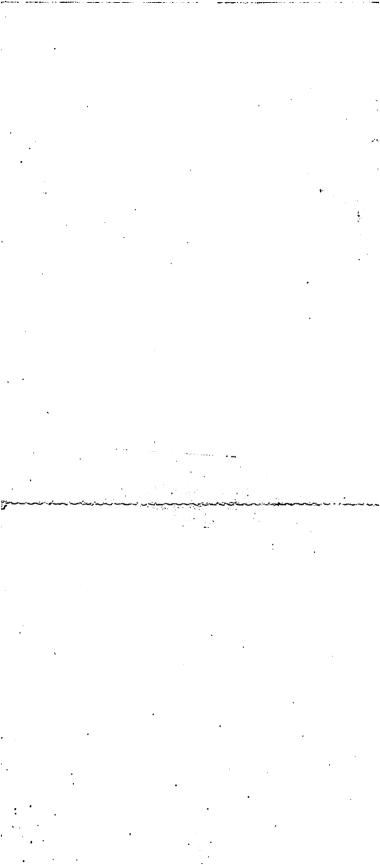
				EXCELLENT	GOOD	AVERAGE	POOR	TERR	IBLE
Friendliness	of o	ur team		D	0	0	0	C)
Timeliness o	of you	ur meal		0	0	О	0	C	j
Quality and	taste	of your r	nea	0		0	0	C)
Value of you	r me	al		0		0	0	. \ C	
How likely is Veggie Grill					nd				
0 1	2	3	4	5	6	7	8	9	10
NOT AT ALL LIKELY				NEUTRAL		Á	EX	TREM LIK	ELY
Any addition	nal co	omments	ors	uggestion	s?				
Meal Period		Lunch	C	inner Da	ate:				
food a gift	fo	ryol		ign up for G	SIIClub				
Please comple We'll send you plus a FREE w	the la	atest news a	and in	nformation al	bout Ve	ggie Grill			
*REQUIRED FI	ELDS								
First Name*	Ll.		LL.					1	1
Last Name*	Li.,		ــــــا					11	
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Birthday*		/ MONTH	D/	/ YE	VR				

We respect your privacy and will never share or sell your information.

Must be 13 years or older to join/participate.

By providing your email address you are opting-in to receive email from Veggie Grill.

You may unsubscribe at any time.



Opinions Relative to Integration of Students with Disabilities

Directions: Please read each statement carefully. Please answer all questions. There are no right or wrong answers. Use the following scale to mark the degree to which you agree or disagree with the statement.

1- I disagree very much
2- I disagree a little
4- I agree a little
5- I agree a pretty much

- 5- I agree pretty much 6- I agree very much

The following survey has been adapted from its original form

Please rate your level of agreement with the following statements.

	1- DVM	2- DPM	3- DL	4- AL	5- APM	6- AVM
Most students with a disability (a student in special education) will make an adequate attempt to complete their assignments.	O	С	0	O	Ç	Ö
Integration of students with disabilities will necessitate extensive retraining of general classroom teachers.	. 0	۰ 0	5	ာ	Ü	၁
Integration offers mixed group interaction that will foster understanding and acceptances of differences among students.	Ö	0	o	0	0	0
It is likely that the student with a disability will exhibit behavior problems in a general classroom	0	G	v	0	Ü	0
Students with disabilities can be best served in general classrooms.	0	Ö	Q	Ü	Ų	၁
The extra attention students with disabilities require will be to the detriment of the other students.	Ů	0	ं	Q	Ų	O
The challenge of being in a general classroom will promote the academic growth of a student with a disability.	Ú	Ų	Ö	ō	Q	Ü
Integration of students with disabilities will require significant changes in general classroom procedures.	Ü	Ç	Ç	o	Ü	0
Increased freedom in the general classroom creates too much confusion for the student with a disability.	Ö	O	O	Ö	၁	0
General-classroom teachers have the ability necessary to work with students with disabilities.	ō	Ç,	Ú	٥	0	Ó
The presence of students with disabilities within the classroom will not promote acceptance of differences on the part of general education students.	O	٥	O	0	0	O
The behavior of students with a disabilities will set a bad example for students without disabilities.	o	0	o	0	0	o
The student with a disability will probably develop academic skills more rapidly in a general classroom than a special classroom.	o	Ċ	O	Ü	O	٥
Integration of the student with a disability will promote the academic growth of the student with a disability.	O	U	Ú	S.	0	3

Subject: tmobile text survey intro

Date: Friday, September 13, 2013 2:58:18 PM Pacific Daylight Time

From: Matt Micek
To: Micek, Matt

Free T-Mobile Message: T-Mobile would like your feedback! All texts sent/received are FREE. Q1/5 is on its way.

Thank you for your feedback.

Subject: tmobile text survey

Date: Friday, September 13, 2013 2:57:43 PM Pacific Daylight Time

From: Matt Micek
To: Micek, Matt

How likely are you to recommend T-Mobile to others? Reply with a number between 1 & 5 where 5 is 'Extremely Likely'.