

PEARSON VUE Customer Satisfaction Survey

1. Was the customer service representative at PEARSON VUE professional? Yes___ No___ If no, explain:

2. Did all of your PEARSON VUE questions get answered in a professional manner? Yes___ No___
If no, explain: _____

3. Was the customer service representative at Pearson VUE professional? Yes___ No___ If no, explain:

4. Did all of your questions get answered in a professional manner? Yes___ No___
If no, explain: _____

5. Did you speak with a representative within 5 minutes at PEARSON VUE? Yes___ No___ If no, explain for each company_____

6. Did the PEARSON VUE staff representative treat you with courtesy and respect? Yes___ No___
If no, explain: _____

7. Did you receive the ordered nurse aide candidate handbooks and applications in a timely manner? Yes___ No___ If no, explain: _____

8. Is the PEARSON VUE testing evaluator on time for testing, courteous and respectful? Yes___ No___
If no, explain: _____

9. Is the PEARSON VUE testing evaluator cleaning up after the competency test is completed?
Yes___ No___ If no, explain:

Additional

Comments:

Please mail the form to:

Alliant Health Solutions
Georgia Nurse Aide Program
P O Box 105753
Atlanta, GA 30348