**[Short Client Name]**

**Employee Opinion Survey** Rev. [Rev Number]

Please complete the survey below and submit to the [ISO MR Regular Title]. You are welcome to submit it anonymously.

Employee Name (optional):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please use the below ratings in considering the following statements:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1= Strongly Agree | 2= Agree | 3= Neutral | 4= Disagree | 5= Strongly Disagree |

\_\_\_\_ The information I receive from management is straightforward and honest.

\_\_\_\_ I have the information I need to do my job well.

\_\_\_\_ Management listens and responds to my concerns.

\_\_\_\_ I am involved in making decisions that affect my job.

\_\_\_\_ I have a clear understanding of the company’s vision, mission and values.

\_\_\_\_ I have the opportunity to provide feedback and input for key decisions.

\_\_\_\_ Communication within my department is good.

\_\_\_\_ I receive adequate recognition for good work.

\_\_\_\_ I feel my efforts are appreciated.

\_\_\_\_ I understand how my efforts contribute to [Short Client Name]’s mission.

\_\_\_\_ I trust my co-workers.

\_\_\_\_ I trust management.

\_\_\_\_ People are concerned about what is good for the entire organization instead of what is good for them.

\_\_\_\_ [Short Client Name] hold people accountable for results.

\_\_\_\_ I have the tools and resources necessary to do my job effectively.

\_\_\_\_ [Short Client Name] policies are administered fairly.

\_\_\_\_ I am proud to work at [Short Client Name].

\_\_\_\_ People have a strong sense of personal responsibility for the performance of their department and the

 performance of [Short Client Name].

\_\_\_\_ [Short Client Name] cares about me as an employee.

Comments/suggestions for improvement: