

## Customer Satisfaction Survey: THDA's Homebuyer Education Program

<b>For Staff Use Only</b>	Agency Name:	Date:	ID #:
<b>Staff Interviewer:</b>	Customer Name:	Loan #	Phone:
	Lender:		

**1. Were you already approved for a loan and/or have a contract on a home when you received homebuyer education at the above-named agency?**

- YES  
 NO

**2. How would you rate this training overall?**

- Excellent       Good       Fair       Poor

**3. How did it compare to what you were told you would learn? Did you learn . . .**

- More than you expected       About what you expected       Less than you expected

**5. How effective was/were the instructor(s)?** *(sometimes there are more than 1 trainer per class)*

- Excellent       Good       Fair       Poor

Name(s) of  
Instructors:

**6. How engaging or exciting was this course?**

- Very engaging       Somewhat engaging       Not very engaging       Not at all engaging

**7. How would your rate the materials and handouts used?**

- Excellent       Good       Fair       Poor

**8. Were you allowed to keep the manuals used in the class? \_\_\_\_\_**

**9. How well did this course help you understand the following?**

- a. Terms related to housing, like escrow accounts, title insurance and loan points       Excellent       Good       Fair       Poor
- b.. What it takes to qualify for a loan       Excellent       Good       Fair       Poor
- c. The steps involved in purchasing a home       Excellent       Good       Fair       Poor
- d.. The financial requirements of purchasing and paying off a home       Excellent       Good       Fair       Poor
- e.. The responsibilities involved in owning your own home       Excellent       Good       Fair       Poor

**10. How did you find out about the counseling program?**

- Radio
  - TV
  - Print media
  - Billboards or signs
  - THDA website list
  - THDA website calendar
  - Referral from lender (bank or mortgage co.) or realtor (which one? Name of lender or realtor \_\_\_\_\_)
  - Referral from city or county government office
  - Referral from friend
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- 11. **How many hours of service did you receive from your trainer?**       1                       2-4                       8-10                       over 10
- 12. **How much did you pay in fees to your trainer?** (*staff: note exact amount below appropriate range*)       0                       1-25                       25 - 50                       over 100
- 14. **Location and Convenience of training facility?**       Excellent                       Good                       Fair                       Poor

ADDITIONAL COMMENTS: Did you feel that the counselor presented the information in a helpful, professional manner?

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