

## Feedback about Ombudsman Services

We welcome your anonymous feedback. Please select the response that best describes your experience with the Office of the University Ombudsman.

1. How did you become aware of the Office of the University Ombudsman? (please check all that apply)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Online Search            | <input type="checkbox"/> Friend/Colleague | <input type="checkbox"/> Bulk Email                   |
| <input type="checkbox"/> Presentation/Orientation | <input type="checkbox"/> Co-worker        | <input type="checkbox"/> I just knew about it         |
| <input type="checkbox"/> Resource Fair            | <input type="checkbox"/> Supervisor       | <input type="checkbox"/> Other office on campus _____ |
| <input type="checkbox"/> Poster                   | <input type="checkbox"/> HR               | <input type="checkbox"/> Other _____                  |
| <input type="checkbox"/> View Screen/Monitor      | <input type="checkbox"/> Family Member    |   |

2. Someone from the office responded promptly to my initial inquiry.

- N/A
- Strongly Agree
- Agree
- No Opinion
- Disagree
- Strongly Disagree

3. The role of the Office of the University Ombudsman was clearly explained to me.

- N/A
- Strongly Agree
- Agree
- No Opinion
- Disagree
- Strongly Disagree

4. The ombudsman listened to my questions and/or concerns.

- N/A
- Strongly Agree
- Agree
- No Opinion
- Disagree
- Strongly Disagree

5. The ombudsman helped me identify and evaluate options to address my concern(s).

- N/A
- Strongly Agree
- Agree
- No Opinion
- Disagree
- Strongly Disagree

6. My overall experience with the Office of the University Ombudsman was helpful.

- N/A
- Strongly Agree
- Agree
- No Opinion
- Disagree
- Strongly Disagree

7. I would refer others to the Office of the University Ombudsman.

- N/A
- Strongly Agree
- Agree
- No Opinion
- Disagree
- Strongly Disagree

8. Working with the Office of the University Ombudsman helped me in the following ways: (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> It provided a safe harbor to discuss my concern(s) | <input type="checkbox"/> I understand the situation more clearly     |
| <input type="checkbox"/> My situation improved or diminished                | <input type="checkbox"/> We discussed a variety of options           |
| <input type="checkbox"/> My concern was resolved                            | <input type="checkbox"/> I became aware of resources available to me |
| <input type="checkbox"/> I felt heard                                       | <input type="checkbox"/> Other _____                                 |

Other Comments/Suggestions:

Please return form by Mail/Campus Mail:

Ombudsman Office Coordinator  
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