

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health**



BOARD OF CHIROPRACTIC

New Licensee Customer Satisfaction Evaluation Form

Name: _____ (Optional)

PLEASE RATE THE QUESTIONS BELOW USING THE SCALE.						
	Excellent	Very Good	Good	Fair	Poor	N/A
1) The application and instructions were clear and easy to understand.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
2) The information requested on the application was done in a logical manner.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
3) The checklist was a beneficial tool in assisting me through the application process.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
4) Any concerns were addressed to my satisfaction by the DC Board of Chiropractic.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
5) The multiple choice jurisprudence examination is an effective test of my knowledge of DC laws and regulations.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
6) The case study discussion portion of the jurisprudence examination is an effective way of teaching real practice situations facing Chiropractic practitioners and how to avoid pitfalls.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
7) If you have a license to practice chiropractic in another state, how did the DC licensure process compare with your previous experience?	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
8) I would rate my overall experience with the DC licensing process as.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>

If you have additional comments or suggestions for improving this program, please enter them below:
