

LAGUARDIA COMMUNITY COLLEGE <u>CITY UNIVERSITY OF NEW YORK</u> DIVISION OF STUDENT AFFAIRS

Registrar's Office Satisfaction Survey

Please take a moment to help us understand your experience with the Registrar's Office. Check the answer that is most true for each question.

1. What is your position at LaGuardia Community College?

Academic Advisor / Student Advisor

Adjunct Faculty

Continuing Education VP/Dean/Director

Continuing Education Staff/Faculty

Department Chair / Deputy Chair

Full-time Faculty Member

Department Head/Director/Manager

Staff Member

3. What was the primary reason for your contact with the Registrar's Office? (Select all that apply)

Attendance (WebAttendance)

Course Proposal

Course Scheduling

Course Substitution

Degree Audit Inquiry

General Information

Grade Submission

Grade Changes

Registration: Special Permissions

Registration: Over-tally or Prerequisite Waiver

Student Data Request

Room Reservation Request

Transfer Credit Inquiry

Other:

5. If you rated any interaction from item 4 average or below average, explain why.

2. How often have you interacted with the Registrar's Office
in the past year (including phone, email, and in-person)?

Frequently (five or more times a semester)

Occasionally (one to four times a semester)

Seldom (one to two times in the academic year)

Never

4. Please rate your satisfaction for each item you selected

Excellent = Excl, **Above Average** = Abv. Avg, **Average** = Avg., **Below Average** = Bel. Avg. or, **Very Poor**

	Excl	Abv. Avg.	Avg.	Bel. Avg.	Very Poor
Attendance					
Course Proposal					
Course Scheduling					
Course Substitution					
Degree Audit Inquiry					
General Information					
Grade Submission					
Grade Changes					
Registration: Special Permissions					
Registration: Over-tally or Prerequisite Waiver					
Student Data Request					
Room Reservation Request					
Transfer Credit Inquiry					
Other					

6. Generally, the Registrar's Office staff is knowledgeable about College's academic policies and procedures.

Strongly Agree.

Agree.

Neutral

Disagree.

Strongly Disagree.

7. Please rate the overall satisfaction of your experience with the Registrar Office's timing, accessibility, quality,

8. Please rate your satisfaction with the Registrar's Office's communication of College/University policies and deadlines

accuracy, and completer	ness of in	format	ion/ass	sistanc	e).	related to the following variables: 1. Attendance Reporting			
Please rate your satisfacti	on with e	ach asj	pect of	your		Excellent			
interaction.						_			
Excellent = Excl, Above Aver			Average	e = Avg	.,	Above Average			
Below Average = Bel. Avg. or	r, Very Po	or			Average				
	Excl	Abv. Avg.	Avg.	Bel. Avg.	Very Poor	Below Average			
Timing		11.6.		1118	1 001	Very Poor			
Accessibility Accuracy									
Quality						2. Final Grades			
Completeness						Excellent			
						Above Average			
						Average			
9. If you have visited the I rate (http://www.lagcc.c				site, pl	ease	Below Average			
	<u>, , , , , , , , , , , , , , , , , , , </u>	- g.o.	<u></u>)•			Very Poor			
Above Average									
Average						3. Course Scheduling			
Below Average						Above Average			
Very Poor									
·									
Comments:						Below Average			
						Very Poor			
						Comments:			
10. Overall, what was the the Registrar's Office?	result of	your v	isit / co	ntact	with	Please tell us how we can improve our services.			
Very Helpful									
Somewhat Helpful	l								
No Difference									
Not Helpful									
Comments:									

Thank you for your participation!