



**NEW YORK CITY  
COLLEGE OF TECHNOLOGY**

THE CITY UNIVERSITY OF NEW YORK  
300 JAY STREET, BROOKLYN, NY 11201-1909

OFFICE OF FINANCIAL AID  
Namm G-13  
718.260.5700 • FAX: 718.254.8525

Dear Student:

This survey has been designed by New York City College of Technology (City Tech) Financial Aid Office to assess your satisfaction with our financial aid services and to help us improve our services and programs.

Please read the questions below, and select the responses that best describe your experience. Once complete please either drop it in our suggestion box located outside the office of NG-13 or please email it to [financialaid@citytech.cuny.edu](mailto:financialaid@citytech.cuny.edu)

We look forward to your responses on how we can better serve you!

Sincerely

**Anita Ramharack**

Financial Aid Associate Director of Student Services  
New York City College of Technology  
The City University of New York



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Date: \_\_\_\_\_

Officer Name: \_\_\_\_\_

Was the name badge visible: **YES** or **NO** (Circle One)

1. What was the purpose of your visit? (Circle One) **Turn In Documents Obtain Documents Ask Questions Other:** \_\_\_\_\_

2. Please Estimate how many times you visited Financial Aid for this purpose: (Circle One) **1 2 3 4 5 6 7 8 9 10+**

3. Did you find the staff Knowledgeable about the Financial Aid Process & Policies? **YES NO** (Circle One)

4. How well did we understand your question? **1** (Not well at all) **2 3 4 5** (Extremely Well) **Circle One**

5. Was your Question/Issue resolved? **YES** or **NO** (Circle One)

6. Overall, how would you rate the quality of service you received today? **1** (poor) **2 3 4 5** (extremely well)

Additional Comments:

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Thank you for participating in this survey!



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