FINANCIAL AID OFFICE
FEEDBACK FORM

Angelo State University

Member, Texas Tech University System

Please help us evaluate the service we have provided by responding to the following questions:

1. WHAT IS THE NATURE OF YOUR VISIT? (please check all that apply)

- ☐ General information
- ☐ Submit completed forms
- ☐ Counseling, personal concerns
- ☐ Satisfactory Academic Progress
- ☐ Loan Information
- ☐ Check financial aid application status
- ☐ Other: _____

_____

2. WITH WHOM DID YOU COME IN CONTACT?

Select One

3. HOW WAS YOUR EXPERIENCE?

Select One

Leave your comments here. We like to hear the good so we can give accolades where they are due and we like to hear the bad so we can improve our customer service for you!

4. OPTIONAL. The information requested below is not required

_____ _____

Name/ASU Campus ID Date Telephone Number or E-mail Address

*Fields outlined in red are required.

Submit