Alleluia FMS

Program Evaluation

Alleluia FMS routinely monitors satisfaction with the service we provide. We need your input to ensure that we are providing quality services. Please answer the following questions and feel free to add comments and suggestions.

Name: _____ Date: _____

Type of Model: _____

1. Did Alleluia provide sufficient supported to utilize the FMS services in SDP?
   ☐ Yes ☐ No ☐ N/A
2. Was Alleluia accessible during the onboarding process?
   ☐ Yes ☐ No ☐ N/A
3. Are you receiving the spending reports for each month?
   ☐ Yes ☐ No ☐ N/A
4. Are the spending reports accurate, to the best of your knowledge?
   ☐ Yes ☐ No ☐ N/A
5. Are you receiving timely responses to your questions?
   ☐ Yes ☐ No ☐ N/A
6. Are the employees being paid in a timely manner?
   ☐ Yes ☐ No ☐ N/A
7. Are your vendors being paid in a timely manner?
   ☐ Yes ☐ No ☐ N/A
8. Are your purchases occurring in timely manner?
   ☐ Yes ☐ No ☐ N/A
9. Overall, are you satisfied with our services?
   ☐ Yes ☐ No ☐ N/A

10. How was the onboarding process at AFMS?

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_____
_____

11. Does AFMS provide you with the needed information in the spending reports?

_____
_____
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12. Does AFMS respond to requests within a reasnable amount of time?

_____
_____

13. What do you like about the support you receive from AFMS?

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14. What don't you like about the support you receive from AFMS?

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15. How can AFMS services be improved?

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16. Comments/Suggestions:_____

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