



FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY

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COLLEGE OF LAW REGISTRAR'S OFFICE CUSTOMER SERVICE COMMENT FORM

Your feedback is important to us. Please help us serve you better by taking a few minutes to tell us about your experience with the services you received from the College of Law Registrar Office. Check the box(es) that applies to you.

1. I am a: An Alumnus Current Student Faculty/Staff Other _____

2. How did you interact with the College of Law Registrar's Office today?
Email In-Person By Telephone Date _____

3. What was the purpose of your interaction with the College of Law Registrar's Office?

| | |
|---|--|
| <input type="checkbox"/> Amendment Request | <input type="checkbox"/> Official Transcript Services |
| <input type="checkbox"/> Bar Certification | <input type="checkbox"/> Registration Inquiries |
| <input type="checkbox"/> Degree Audit Inquiry | <input type="checkbox"/> Request copies of Official Record |
| <input type="checkbox"/> Enrollment/Degree Verification | <input type="checkbox"/> Veteran Services |
| <input type="checkbox"/> Name/Address Change | <input type="checkbox"/> Other (please specify) |
| | |
| | |

4. In general, how do you prefer to get information or have your questions answered?

| | |
|--|---|
| <input type="checkbox"/> Email communication | <input type="checkbox"/> Telephone |
| <input type="checkbox"/> In-Person | <input type="checkbox"/> Written Correspondence |

5. Overall, I am satisfied with the service I received from the College of Law Registrar's Office today.

Agree Disagree

COMMENTS:

Send completed survey to RegistrarCOL@famu.edu

Thank you for giving us the opportunity to serve you better!