

Mississippi Blood Services  
BLOOD DRIVE SATISFACTION SURVEY

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**The following questions pertain to your Marketing Representative.**

Were you able to successfully recruit donors in advance? \_\_\_\_\_

Were donors signed up to donate at an appointed time? \_\_\_\_\_

Did you have adequate contact with your Marketing Representative? \_\_\_\_\_

Did your Marketing Representative speak to your group members? \_\_\_\_\_

Were adequate marketing materials provided? \_\_\_\_\_

Did the marketing materials assist you in your recruitment efforts? \_\_\_\_\_

Did you receive the marketing materials well in advance before the blood drive? \_\_\_\_\_

Was the Marketing Representative helpful to you in the planning of your blood drive? \_\_\_\_\_

Do you feel the blood drive was a success and/or achieved your goal? \_\_\_\_\_

Did you have any problems with your Marketing Representative? \_\_\_\_\_

Please rate your Marketing Representative

**Excellent** \_\_\_\_\_ **Good** \_\_\_\_\_ **Fair** \_\_\_\_\_ **Needs Improvement** \_\_\_\_\_

**The following questions pertain to the Blood Collection Staff:**

Did the mobile arrive on time? \_\_\_\_\_

Did the blood drive begin on time? \_\_\_\_\_

Were donors kept waiting before the screening process? \_\_\_\_\_

Were donors kept waiting before the donation process? \_\_\_\_\_

Were you satisfied with the number of staff assigned to your blood drive? \_\_\_\_\_

Did the staff relate to you in a professional and courteous manner? \_\_\_\_\_

Did the staff relate to the donors in a professional and courteous manner? \_\_\_\_\_

If donor reactions occurred, were you satisfied with the way they were handled? \_\_\_\_\_

Did you have any problems with the mobile team? \_\_\_\_\_

Please rate your Collection Staff

**Excellent** \_\_\_\_\_ **Good** \_\_\_\_\_ **Fair** \_\_\_\_\_ **Needs Improvement** \_\_\_\_\_

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Please select your organization type:

A. Business \_\_\_ B. Non-profit \_\_\_ C. Church \_\_\_ D. School \_\_\_ E. Civic \_\_\_ F. Synagogue \_\_\_ G. Other \_\_\_

Please circle the approximate number of staff or members of your organization:

A. 1-200 \_\_\_ B. 200-400 \_\_\_ C. 400-600 \_\_\_ D. 600-800 \_\_\_ E. Over 800 \_\_\_

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

Title: \_\_\_\_\_