LUMEN CLOUD

CUSTOMER SATISFACTION SURVEY

Q2 · 2026
Form #CSAT-0426

Your feedback helps us improve. This survey takes 3 minutes.

01 ABOUT YOU

NAME (OPTIONAL)
e.g. Alex Morgan

ACCOUNT / CUSTOMER ID
LC-XXXXX

DATE

02 RATE YOUR EXPERIENCE

Q1. How would you rate the overall quality of our service?
◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5
Very Dissatisfied — Very Satisfied

Q2. How would you rate the speed of our support response?
◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5
Very Dissatisfied — Very Satisfied

Q3. Did our product meet your expectations?
◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5
Very Dissatisfied — Very Satisfied

Q4. How easy was it to find what you were looking for?
◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5
Very Dissatisfied — Very Satisfied

Q5. How would you rate the value for money of our service?
◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5
Very Dissatisfied — Very Satisfied

03 NPS LIKELIHOOD

How likely are you to recommend us to a friend or colleague?

◯ 0 ◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯ 6 ◯ 7 ◯ 8 ◯ 9 ◯ 10

Not at all likely — Extremely likely

04 OPEN FEEDBACK

TELL US ANYTHING ELSE (OPTIONAL):

What worked well, what could be better, any moment that stood out

05 CONTACT (OPTIONAL)

☐ I'd like a follow-up email

EMAIL ADDRESS

you@example.com

X

Signature

SIGNATURE

DATE SIGNED