

* Required Information

As a part of our ongoing efforts to hold ourselves accountable for stellar customer service, we are soliciting your feedback regarding campus conditions, your general satisfaction with our services, our work order process, and our performance.

Our goal is to provide high-quality space and deliver timely, quality, and cost-effective services in order to maintain our campus as a great place to live, learn and work.

Your answers to these questions will be invaluable to help us improve our department's responses to your needs. On average, this survey should take 10-minutes to complete, yet your answers can make a world of difference as we endeavor to continuously improve.

Please click below to begin. Thank you for your help and for taking the time to share your thoughts and impressions.

Sincerely,
Andrew Christ
Senior VP for Real Estate Development & Capital Operations
New Jersey Institute of Technology

1. My position most closely matches: (Select one option)

- ☐ Dean/VP
- ☐ Academic Department Head
- ☐ Building Manager
- ☐ Administrative Support
- ☐ Staff
- ☐ Faculty
- ☐ Student
- ☐ Other (Please specify) _____

NOTE : IF ANSWER TO Q1 is

Dean/VP Go to Page No. 3

Academic Department Head Go to Page No. 3

Building Manager Go to Page No. 3

Administrative Support Go to Page No. 3

Staff Go to Page No. 3

Faculty Go to Page No. 3

Student Continue to next question

Other (Please specify) Go to Page No. 3

If Did Not Answer Then Go to Page No. 3

* 2. Number of years at New Jersey Institute of Technology? (Select one option)

- ☐ 0-5
- ☐ 6-10
- ☐ 11-15
- ☐ 16-20
- ☐ 20+

*3. Faculty & Staff: Please indicate in which campus building you predominantly work:

(Select one option)

- ☐ Campbell Hall
- ☐ Campus Center
- ☐ Central Avenue Building
- ☐ Central King Building
- ☐ Chen
- ☐ Colton Hall
- ☐ Cullimore Hall
- ☐ Cypress Hall
- ☐ Eberhardt Hall
- ☐ Electrical and Computer Engineering Center
- ☐ Facilities Services Building
- ☐ Facilities Services Building Annex
- ☐ Facilities Services Warehouse
- ☐ Faculty Memorial Hall
- ☐ Fenster Hall
- ☐ Greek 1
- ☐ Greek 2
- ☐ Greek 3
- ☐ Greek 4
- ☐ Greek 5
- ☐ Guttenburg Information Technology Center
- ☐ Honors College
- ☐ Jersey City Satellite
- ☐ Kupfrian Hall
- ☐ Laurel Hall
- ☐ Life Sciences and Engineering Center
- ☐ Mechanical Engineering Center
- ☐ Micro Electronics Building
- ☐ Maple Hall
- ☐ Oak Hall
- ☐ Otto H. York Center for Environmental Engineering and Science
- ☐ Redwood Hall
- ☐ Specht Building
- ☐ Student Mall and Police
- ☐ Tiernan Hall
- ☐ VentureLink 105
- ☐ VentureLink 211
- ☐ Wellness & Events Center
- ☐ Weston Hall

NOTE

:
IF ANSWER TO
Q3
is

**Campbell
Hall**

Go to Page No. 9

Campus Center
Go to Page No. 9

Central Avenue Building
Go to Page No. 9

Central King Building
Go to Page No. 9

Chen
Go to Page No. 9

Colton Hall
Go to Page No. 9

Cullimore Hall
Go to Page No. 9

Cypress Hall
Go to Page No. 9

Eberhardt Hall
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Electrical and Computer Engineering Center
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Facilities Services Building
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Facilities Services Building Annex
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Facilities Services Warehouse
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Faculty Memorial Hall
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Fenster Hall
Go to Page No. 9

Greek 1
Go to Page No. 9

Greek 2
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Greek 3
Go to Page No. 9

Greek 4
Go to Page No. 9

Greek 5
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Guttenburg Information Technology Center
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Honors College
Go to Page No. 9

Jersey City Satellite
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Kupfrian Hall
Go to Page No. 9

Laurel Hall
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Life Sciences and Engineering Center
Go to Page No. 9

Mechanical Engineering Center
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Micro Electronics Building
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Maple

Hall

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Oak

Hall

[Go to Page No. 9](#)

Otto

H.

York

Center

for

Environmental

Engineering

and

Science

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Redwood

Hall

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Specht

Building

[Go to Page No. 9](#)

Student

Mall

and

Police

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Tiernan

Hall

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VentureLink

105

[Go to Page No. 9](#)

VentureLink

211

[Go to Page No. 9](#)

Wellness

&

Events

Center

[Go to Page No. 9](#)

Weston

Hall

[Continue to next question](#)

* 6. Please Indicate which residence hall you reside in, or note if you live off campus:

(Select one option)

- ☐ Cypress Hall
- ☐ Greek 1
- ☐ Greek 2
- ☐ Greek 3
- ☐ Greek 4
- ☐ Greek 5
- ☐ Honors College
- ☐ Laurel Hall
- ☐ Oak Hall
- ☐ Redwood Hall
- ☐ Maple Hall
- ☐ Off Campus

* 7. Please indicate which campus building you spend the majority of your time, outside of residence halls. (Select one option)

- ☐ Campbell Hall
- ☐ Campus Center
- ☐ Central Avenue Building
- ☐ Central King Building
- ☐ Chen
- ☐ Colton Hall
- ☐ Cullimore Hall
- ☐ Eberhardt Hall
- ☐ Electrical and Computer Engineering Center
- ☐ Facilities Services Building
- ☐ Facilities Services Building Annex
- ☐ Facilities Services Warehouse
- ☐ Faculty Memorial Hall
- ☐ Fenster Hall
- ☐ Guttenburg Information Technology Center
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- ☐ Mechanical Engineering Center
- ☐ Micro Electronics Building
- ☐ Otto H. York Center for Environmental Engineering and Science
- ☐ Specht Building
- ☐ Student Mall and Police
- ☐ Tiernan Hall
- ☐ VentureLink 105
- ☐ VentureLink 211
- ☐ Wellness & Events Center
- ☐ Weston Hall

8. For the building selected above, please assess the following areas: Building Condition and Cleanliness:

	Excellent	Good	Average	Poor	Terrible
(a) General appearance of the exterior of the building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) General repair of the interior building shell (i.e. wall, floors, ceiling)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) General repair of the furnishings of interior space	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) Cleanliness of interior spaces	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Cleanliness of restrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(f) Availability of consumable resources in restrooms (paper products, soap, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Comments/Suggestions- Building Condition & Cleanliness:

10. For the building selected above, please assess the following areas: Building Comfort:

	Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree
(a) Temperature is frequently at a reasonable level:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) The air quality in my building is good:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) My building is free of undesirable odors:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) My building is free of distracting noises:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Water fountains in my building are of good quality:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Comments/Suggestions- Building Comfort:

12. Considering all of campus, please assess the following areas: Campus Grounds:

	Excellent	Good	Average	Poor	Terrible
(a) Condition of hardscapes (sidewalks, roads, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) Manicured Green Space	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) Flower Beds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) Trees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Athletic Fields	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Comments/Suggestions- Campus Grounds

14. Please rate your expectation level for Facilities Department performance:
(Select one option)

- ☐ Very High Expectations
- ☐ High Expectations
- ☐ Moderate Expectations
- ☐ Low Expectations
- ☐ Very Low Expectations

15. Please rate your general satisfaction
with Facilities Department performance:
(Select one option)

- ☐ Extremely Satisfied
- ☐ Somewhat Satisfied
- ☐ Neutral
- ☐ Somewhat Dissatisfied
- ☐ Extremely Dissatisfied

* 16. How often do you submit a formal facilities work order request? (Select one option)

- ☐ Never
- ☐ 1 Time/Year
- ☐ 2-5 Times/Year
- ☐ 6-10 Times/Year
- ☐ 11-20 Times/Year
- ☐ Over 20 Times/Year
- ☐ N/A Don't Know What This Is

17. Please describe how strongly you agree with the following statements regarding the service request process:

	Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree
(a) I understand the procedure for submitting work requests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) I utilize the proper procedure for submitting work requests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) The work request process meets my needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NOTE : Display this comment only if answer to Q#16 is **1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year**

Please choose the below answer that best describes how you interact when you have a service request.

NOTE : Answer the below question only if answer to (Q#16 is **1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year**)

18. My most frequent means for requesting service is:

(Select one option)

- ☐ Phone
- ☐ Web
- ☐ Email
- ☐ In Person
- ☐ Other (Please specify) _____

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

19. The most effective means of requesting services is:

(Select one option)

- ☐ Phone
- ☐ Web
- ☐ Email
- ☐ In Person
- ☐ Other (Please specify) _____

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

20. For me, the most important component of the work request process is:

(Select one option)

- ☐ The process to submit a work request is effective
- ☐ Notification of work request status (i.e. pending, in progress, complete)
- ☐ Clear communication of work request schedule
- ☐ Work requests are performed courteously and professionally
- ☐ Work requests are performed completely
- ☐ Work requests are performed in a timely manner

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

21. Comments/Suggestions- Service Request Process:

NOTE : Answer the below question only if answer to (Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year)

22. Please describe how often, in your recent experience, the following is true of the Mechanical Department (i.e. electrical, HVAC, plumbing, etc.).

	Always	Most of the time	About half the time	Sometimes	Never	N/A
(a) Work order schedule is communicated effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) Schedule is adhered to or I am made aware of changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) The work schedule is generally acceptable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) I am asked for feedback or receive feedback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Work is performed courteously/professionally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(f) Work is performed competently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(g) Once work has begun, staff is timely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(h) Work meets my expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

23. Please rate your general satisfaction with the Mechanical Department performance: (Select one option)

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

24. Comments/Suggestions- Mechanical Department:

NOTE : Answer the below question only if answer to(Q#16 is **1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year**)

25. Please describe how often, in your recent experience, the following is true of the Structural Department (i.e. carpentry, painting, locksmith, etc.).

	Always	Most of the time	About half the time	Sometimes	Never	N/A
(a) Work order schedule is communicated effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) Schedule is adhered to or I am made aware of changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) The work schedule is generally acceptable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) I am asked for feedback or receive feedback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Work is performed courteously/professionally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(f) Work is performed competently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(g) Once work has begun, staff is timely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(h) Work meets my expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

26. Please rate your general satisfaction with the Structural Department performance: (Select one option)

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

NOTE : Answer the below question only if answer to((Q#16 is 1 Time/Year OR 2-5 Times/Year OR 6-10 Times/Year OR 11-20 Times/Year OR Over 20 Times/Year))

27. Comments/Suggestions- Structural Department:

28. Please describe how often, in your recent experience, the following is true of Custodial Services.

	Always	Most of the time	About half the time	Sometimes	Never	N/A
(a) Work order schedule is communicated effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) Schedule is adhered to or I am made aware of changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) The work schedule is generally acceptable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) I am asked for feedback or receive feedback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Work is performed courteously/professionally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(f) Work is performed competently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(g) Once work has begun, staff is timely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(h) Work meets my expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. Please rate your general satisfaction with Custodial Services' performance:

(Select one option)

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

30. Comments/Suggestions- Custodial Services

31. Please describe how often, in your recent experience, the following is true of Grounds Services.

	Always	Most of the time	About half the time	Sometimes	Never	N/A
(a) Work order schedule is communicated effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(b) Schedule is adhered to or I am made aware of changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(c) The work schedule is generally acceptable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(d) I am asked for feedback or receive feedback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(e) Work is performed courteously/professionally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(f) Work is performed competently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(g) Once work has begun, staff is timely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(h) Work meets my expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32. Please rate your general satisfaction with Grounds Services' performance:

(Select one option)

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

33. Comments/Suggestions- Grounds Services:

34. How satisfied are you with the library facilities at NJIT? (Select one option)

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

35. How satisfied are you with the technology resources at NJIT? (Select one option)

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neutral
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied