

## CLIENT TESTIMONIAL QUESTIONNAIRE FORM

1. How would you describe your overall experience with our firm?
2. What would you describe as our firm's strongest asset?
3. How would you say our firm provided the most benefit to you personally and why?
4. What do you believe was the key(s) in our client/counselor relationship?
5. Can you describe a benefit you received from our firm that you did not expect to receive at the outset of our relationship?
6. Would you recommend our services to your friends, co-workers, etc.? If so, how would you describe our firm to them?
7. Do you have any other comments about me, my firm's work and your experience with us?
8. Do we have your approval to use the above comments in our marketing materials?

Yes \_\_\_\_\_ No \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_