

Customer Service Interaction Observation Checklist

Observer Name

Date

Employee Name

Interaction Type

Criteria	Yes	No	N/A	Comments
Greeted customer appropriately	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Listened actively to customer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Spoke clearly and professionally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Provided accurate information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Resolved issue or offered next steps	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Thanked the customer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Additional Notes