

# Retirement Home Dining Satisfaction Form

Resident Name

Date

Meal Type

Food Quality

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Service

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Cleanliness

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Additional Comments