**Statistical Consulting Feedback Form (v1.2)**

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| This survey focuses on the conduct of sessions between our consultants and the researcher / student session. Your responses will be kept confidential and will not be shared with any of your consultants. Responses will only be reported in the aggregate without identifying information. Completing this survey is completely voluntary and you may quit this survey at any time or skip any question you do not wish to answer. **Please submit the completed form to Zulfa Al Toby (altobyz@squ.edu.om) as early as possible**. | | | | | | |
| For statement 1) to 3), indicate the extent of your agreement, from strongly disagree to strongly agree | | | | | | |
|  | Strongly Disagree | | Disagree | Neural | Agree | Strongly Agree |
| 1. The consultant understood my research problem | 🞏 | | 🞏 | 🞏 | 🞏 | 🞏 |
| 1. I was able to understand the statistical advice presented to me | 🞏 | | 🞏 | 🞏 | 🞏 | 🞏 |
| 1. I was satisfied with the consulting services provided to me | 🞏 | | 🞏 | 🞏 | 🞏 | 🞏 |
| 1. How long did your consulting session last? | <20 mins 🞏 | | <40 mins 🞏 | <1 hr  🞏 | 2-3 hrs 🞏 | 3+ hrs 🞏 |
| 1. How many consulting sessions have you had with the statistical consultant? | 1 🞏 | | 2 🞏 | 3 🞏 | 4 🞏 | 5+ 🞏 |
| 1. What role(s) did the consultant play in your statistical consulting session? Can select more than one | | | | | | |
| 🞏 Teacher, who explains the statistical procedures used | | 🞏 Analyst, who analyzes the data for me | | | | |
| 🞏 Guide, who provides advice to my research problem | | 🞏 Collaborator, who is a research partner for me | | | | |

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| 1. College \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| 1. If you are a student, your course is PhD / MSc / BSc. / BA / Other \_\_\_\_\_\_\_\_ | | | | | |
| 1. If you are a staff, your Title is Prof / Asso Prof. / Assi Prof. / Senior Consul / Consul / Other \_\_\_\_\_\_\_\_ | | | | | |
| 1. How many times you have used our services in the past one year? | 1 🞏 | 2 🞏 | 3 🞏 | 4 🞏 | 5+ 🞏 |

\*\*\* Thank you for taking your time to participate in this survey \*\*\*