

CUSTOMER EXPERIENCE FEEDBACK & NET PROMOTER SCORE (NPS)

STANDARDIZED 0-10 NPS LOYALTY RATING, DETRACTOR/PROMOTER SEGMENTATION & TOUCHPOINT ANALYSIS

CUSTOMER / ACCOUNT: _____ PRODUCT / TIER USED: _____ SURVEY DATE: ____/____/20____
CUSTOMER EMAIL: _____ TENURE AS CUSTOMER: ☐ <6M ☐ 1-2Y ☐ 3Y+ CLASSIFICATION: ☐ Promoter ☐ Neutral

1. THE ULTIMATE QUESTION: NET PROMOTER SCORE (NPS 0 - 10 SCALE)

HOW LIKELY ARE YOU TO RECOMMEND OUR PRODUCT OR SERVICE TO A COLLEAGUE OR FRIEND?

0	1	2	3	4	5	6	7	8	9	10
0 - 6: DETRACTORS (Unlikely)			7 - 8: PASSIVES (Neutral)			9 - 10: PROMOTERS (Extremely Likely)				

2. CORE EXPERIENCE DRIVERS & TOUCHPOINT EVALUATION

CUSTOMER JOURNEY TOUCHPOINT	SATISFACTION EVALUATION CRITERIA	SCORE: [1] [2] [3] [4] [5]
Product Usability & Interface	Platform is intuitive, responsive, and easy to navigate.	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Customer Support Experience	Support team resolved tickets promptly and accurately.	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Reliability & Feature Uptime	Platform performs consistently without technical bugs.	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Pricing & Billing Transparency	Clear subscription tiers with no unexpected charges.	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. PRIMARY REASON FOR YOUR RATING & UNMET FEATURE REQUESTS

WHAT IS THE PRIMARY REASON FOR THE SCORE YOU GAVE ABOVE?

WHAT SINGLE FEATURE OR ENHANCEMENT WOULD MAKE THIS A 10/10 EXPERIENCE?

CUSTOMER SUCCESS FOLLOW-UP PERMISSION & CONTACT CONFIRMATION:

Follow-Up Permission: ☐ Yes, a Customer Success Manager may contact me to discuss my feedback.

Customer Signature / Initials: _____ Date Completed: ____/____/20____