

2015 Michigan Trial Court Public Satisfaction Survey Chief Judge Certification

I certify that _____
Court Name

conducted the 2015 public satisfaction survey in accordance with the requirements set forth by the State Court Administrative Office and returned to SCAO's Statistical Research Division all surveys that were returned to this court.

Chief Judge Signature

Date

Chief Judge Name (type or print)

Return surveys to the Statistical Research Division by November 1, 2015, by postal mail or e-mail.

By Postal Mail

Include all returned surveys, a blank copy of the distributed survey, and the signed certification to:

Statistical Research Division
Attention: Public Satisfaction Survey
State Court Administrative Office
P.O. Box 30048
Lansing, MI 48909

By E-Mail

Scan all returned surveys, a blank copy of the distributed survey, and the signed certification and attach the Adobe PDF file to an e-mail message to:

publicsatisfaction@courts.mi.gov