

RESTAURANT * SECRET SHOPPER EVALUATION

Restaurant name:

Date/Time of visit:

Name or Description of Host/Hostess:

Name or Description of Server

Rate the service that you received for each of the items based on the following scale:

1 = Poor to 5 = Excellent

Item/Description **Rating (circle one)**

Restaurant Appearance

- | | | | | | |
|---|---|---|---|---|---|
| 1. Was the outside appearance attractive – curb appeal? | 1 | 2 | 3 | 4 | 5 |
| 2. Did the outside appear to be clean? (sidewalks, windows, doors) | 1 | 2 | 3 | 4 | 5 |
| 3. Was the restaurant clean and attractive inside? | 1 | 2 | 3 | 4 | 5 |
| 4. Was the host/hostess area attractive and spacious? | 1 | 2 | 3 | 4 | 5 |
| 5. How did you feel about the overall appearance of the restaurant? | 1 | 2 | 3 | 4 | 5 |

Restaurant Staff

- | | | | | | |
|---|---|---|---|---|---|
| 1. Were you promptly greeted by the host/hostess? | 1 | 2 | 3 | 4 | 5 |
| 2. Was the greeting friendly and professional? | 1 | 2 | 3 | 4 | 5 |
| 3. Were you seated promptly? | 1 | 2 | 3 | 4 | 5 |
| 4. Was the server knowledgeable about the menu selection? | 1 | 2 | 3 | 4 | 5 |
| 5. Did the server suggest a beverage or appetizer? | 1 | 2 | 3 | 4 | 5 |
| 6. Was the server's appearance appropriate to the nature of the restaurant? | 1 | 2 | 3 | 4 | 5 |
| 7. Did the food arrive in a timely fashion? | 1 | 2 | 3 | 4 | 5 |
| 8. Did the server check back with you during the course of your meal? | 1 | 2 | 3 | 4 | 5 |
| 9. Were the plates cleared at the end of your meal? | 1 | 2 | 3 | 4 | 5 |
| 10. Was the bill settled in a timely fashion? | 1 | 2 | 3 | 4 | 5 |
| 11. What was your overall experience with the customer service? | 1 | 2 | 3 | 4 | 5 |

Food

- | | | | | | |
|--|---|---|---|---|---|
| 1. What is your overall impression of the menu selection? | 1 | 2 | 3 | 4 | 5 |
| 2. Did your meal arrive as ordered? | 1 | 2 | 3 | 4 | 5 |
| 3. How would you rate the overall food presentation? | 1 | 2 | 3 | 4 | 5 |
| 4. Did the food meet expectation, i.e. quality, temperature? | 1 | 2 | 3 | 4 | 5 |
| 5. Was the menu item a good value for the price? | 1 | 2 | 3 | 4 | 5 |
| 6. At the completion of your meal, did your server invite you to return? | 1 | 2 | 3 | 4 | 5 |

Miscellaneous

- | | | | | | |
|---|---|---|---|---|---|
| 1. Was the overall dining experience enjoyable? Would you return? | 1 | 2 | 3 | 4 | 5 |
| 2. Were the restaurant hours convenient? | 1 | 2 | 3 | 4 | 5 |

- | | | | | | |
|--|---|---|---|---|---|
| 3. Was the food priced accurately? | 1 | 2 | 3 | 4 | 5 |
| 4. Are the restroom facilities easily located? | 1 | 2 | 3 | 4 | 5 |
| 5. Are the restrooms neat and clean? | 1 | 2 | 3 | 4 | 5 |

Total Score: _____

Your name: _____

Approximate time spent in the restaurant: _____

Meal items purchased: _____

Total Dollar Amount Spent: _____

Did you use any coupons or take advantage of any specials? _____

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