Graduate Satisfaction Survey
To
Follow-Up Survey of Funeral Service Graduate
Program Quality
Of
W.L. Philbrick School of Funeral Service Education
Miami Dade College
11380 NW 27th Avenue
Miami, FL 33167
305-237-1244

For Program Use Only – Please Do Not Write below This Line

Rating of Job Duties

Overall Rating = __________

Total Rating Section A = _______/ 4 Tasks

Total Rating Section B = _______/ 11 Tasks

Total Rating Section C = _______/ 9 Tasks

Grand Total of All Sections A, B, and C = _______/ 24 Tasks

Graduate Satisfaction Index (ESI) = Grand Total __________

Graduate Satisfaction Index = __________________________

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Entry Level
Graduate Satisfaction Survey

Follow-up Survey of Quality of the Funeral Service Education Program
Miami Dade College Funeral Service Education

Directions: Please read carefully

Obtaining information about your level of satisfaction with our Funeral Service Education Program is an essential step in evaluating our educational program. All data collected will remain confidential and will be used for program evaluation only.

The Graduate Satisfaction Survey has five sections: one section for information related to you as an employee, one section for information related to general job requirements, a third section related to preparation for the technical requirements for your job, a fourth section related to your preparation in the management areas and a fifth section related to the over-all quality of the educational process. PLEASE BE AS FRANK, CLEAR AND HONEST AS POSSIBLE IN YOUR RATING, SUGGESTIONS, EXPLANATIONS, ETC. The results of this survey can only be as useful as your ratings are accurate, so please keep in mind the following:

Each item should be evaluated and rated independently of all others. Occasionally, an educational program will achieve much the same rating on all items but more typically, the quality of the program varies, having stronger and weaker points. Therefore, consider each item separately and rate each item as accurately as possible. Each item should be based upon your own experience and not that of your fellow students (such as “he said…” or “she said…”)

When you have completed the survey, please return it promptly to your instructor. Thank you for your participation in this survey.

Please complete the following:

Part 1: BACKGROUND INFORMATION

Length of employment at time of rating: ____________months / years

Name: __________________________________________________

Present Job Title: _________________________________________

Yearly Salary: $ ___________
The following four sections of the survey involve your evaluation of several areas of the graduate’s educational preparation. Please rate your preparation using the following scale:

<table>
<thead>
<tr>
<th>SCALE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 NOT APPLICABLE</td>
<td>I do not perform these tasks in my current job.</td>
</tr>
<tr>
<td>1 POOR</td>
<td>This topic was not covered and my current job requires me to perform it.</td>
</tr>
<tr>
<td>2 FAIR</td>
<td>This topic was superficially covered and I require additional training to perform it.</td>
</tr>
<tr>
<td>3 GOOD</td>
<td>This topic was adequately covered and I am able to meet the performance standards most of the time.</td>
</tr>
<tr>
<td>4 VERY GOOD</td>
<td>This topic was covered and I was able to exceed minimal performance standards when I started work.</td>
</tr>
<tr>
<td>5 EXCELLENT</td>
<td>The topic was thoroughly covered and I was able to teach and supervise other employees upon graduation.</td>
</tr>
</tbody>
</table>

Please remember that this evaluation is for an ENTRY LEVEL GRADUATE. Provide a rating for EACH of the job duties listed by circling one of the scale numbers in the right hand column. PLEASE DO NOT SKIP ANY RATING.

Part II: Evaluation of Instruction

Section A – General Job Duties

1. Telephone answering skills and etiquette. 0 1 2 3 4 5
2. Ability to deal with public. 0 1 2 3 4 5
3. Ability to work with families. 0 1 2 3 4 5
4. Ability to work with professional contacts. (physicians, nurses, etc) 0 1 2 3 4 5

Section A Total _________
### Section B: Technical Skills

1. Disinfection and aseptic techniques.  
   | 0 | 1 | 2 | 3 | 4 | 5  
2. Posing of features.  
   | 0 | 1 | 2 | 3 | 4 | 5  
3. Selection and mixing of chemicals.  
   | 0 | 1 | 2 | 3 | 4 | 5  
4. Selecting and raising vessels.  
   | 0 | 1 | 2 | 3 | 4 | 5  
5. Injection techniques.  
   | 0 | 1 | 2 | 3 | 4 | 5  
6. General embalming knowledge.  
   | 0 | 1 | 2 | 3 | 4 | 5  
7. Knowledge of OSHA and other regulatory standards.  
   | 0 | 1 | 2 | 3 | 4 | 5  
8. Restorative art abilities.  
   | 0 | 1 | 2 | 3 | 4 | 5  
9. Dressing and casketing techniques.  
   | 0 | 1 | 2 | 3 | 4 | 5  
10. Cosmetic selection and application.  
    | 0 | 1 | 2 | 3 | 4 | 5  
11. Familiarity with embalming equipment and instruments.  
    | 0 | 1 | 2 | 3 | 4 | 5  

**Section B Total: _________**

### Section C - Management Skills

12. Obtaining information for Death Certificates  
    | 0 | 1 | 2 | 3 | 4 | 5  
13. Completing and filing Death Certificates  
    | 0 | 1 | 2 | 3 | 4 | 5  
14. Arranging for shipping of body from another funeral director  
    | 0 | 1 | 2 | 3 | 4 | 5  
15. Arranging for shipping of body to another funeral director  
    | 0 | 1 | 2 | 3 | 4 | 5  
16. Obtaining first call information  
    | 0 | 1 | 2 | 3 | 4 | 5  

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17. Completing Veterans forms  0 1 2 3 4 5 
18. Arranging for newspaper obituary  0 1 2 3 4 5 
19. Knowledge of religious services  0 1 2 3 4 5 
20. Knowledge of fraternal services  0 1 2 3 4 5 

Section C Total ___________________

Part III: Overall Rating

How would you rate the overall quality of your education experiences at MDC? 0 1 2 3 4 5 
How would you rate the overall quality of your experience in the FSE program? 0 1 2 3 4 5 
How would you rate the embalming process at MDC?  0 1 2 3 4 5 
How would you rate your funeral directing preparation at MDC?  0 1 2 3 4 5 

(PLEASE PRINT)

My direct supervisor’s name is: _______________________________________
My place of employment is: __________________________________________
My employer's full address is: ________________________________________

Please answer the following questions

1. Based upon your work experience, what are the STRENGTHS of the MDC Funeral Service Program?

2. Based upon your work experience, what are the WEEKNESSES of the MDC Funeral Service Program?
3. What tasks or duties are required of your job and need to be included or emphasized in the FSE Program?

4. To help MDC prepare future graduates, I offer the following comments/suggestions:

Print Name: _________________________________
Signature: ___________________________ Date: _____________