Staff Morale Survey

* Required

* This form will record your name, please fill your name.

1. What was your high this week?

2. What was your low this week?
3. How was your stress level? *

- 😞 Too High
- 😞 High
- 😞 Moderate
- 😞 Low
- 😞 Healthy

4. How was your morale? *

- 😞 Very Low
- 😞 Low
- 😞 Okay
- 😞 Good
- 😞 Great

5. How was your workload? *

- 😞 Too Heavy
- 😞 Moderately Heavy
- 😞 Okay
- 😞 Reasonable
- 😞 Just Right
6. Has someone on staff shown you appreciation this week?
   - Yes
   - No

7. Have you shown someone else on appreciation this week?
   - Yes
   - No

8. Anything else?

9. Please share one thing you were grateful for this week.

10. Buddy System
    - I would like to request a buddy check-in
11. Please share ideas for micro-learnings at future staff meetings.