

Thank you for choosing Anova Virtual Hotel & Resort for your vacation. Our goal is to continuously improve and enrich our services, so your opinion is very important to us. Spend a few minutes of your time and fill out the questionnaire. Thank you in advance and we hope to welcome you again in our hotel.

Very Good
Excellent Good Fair Poor

Reservation (Please rate the)

Service on arrival and check-in.	<input type="checkbox"/>				
Arrival and departure procedures.	<input type="checkbox"/>				
Reception's ability to answer your questions.	<input type="checkbox"/>				

Room / Bathroom (Please rate the)

Cleanliness of your room.	<input type="checkbox"/>				
Size of the room.	<input type="checkbox"/>				
Amenities of the room.	<input type="checkbox"/>				
Interior of the room.	<input type="checkbox"/>				
Lighting and temperature of the room.	<input type="checkbox"/>				
Quality of sleep.	<input type="checkbox"/>				
Quality of bed.	<input type="checkbox"/>				
Quality of room service.	<input type="checkbox"/>				
Condition of the bathroom.	<input type="checkbox"/>				
Cleanliness of the bathroom.	<input type="checkbox"/>				
Room overall.	<input type="checkbox"/>				
Value for money.	<input type="checkbox"/>				

Restaurant / Bar / Food (Please rate the)

Quality of food at breakfast.	<input type="checkbox"/>				
Quality of food at lunch.	<input type="checkbox"/>				
Quality of food at dinner.	<input type="checkbox"/>				
Hot and fresh food.	<input type="checkbox"/>				
Cleaningless of bar.	<input type="checkbox"/>				
Cleaningless of restaurant.	<input type="checkbox"/>				
Variety of food and beverages.	<input type="checkbox"/>				
Choice of items available on the menu	<input type="checkbox"/>				
Existence of different food for children.	<input type="checkbox"/>				
Staff's knowledge in bar.	<input type="checkbox"/>				
Staff's efficiency in service.	<input type="checkbox"/>				
Staff's speed in service.	<input type="checkbox"/>				

Please rate the overall impression of

Very Good
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Greek restaurant.	<input type="checkbox"/>				
Italian restaurant.	<input type="checkbox"/>				
Mexican restaurant.	<input type="checkbox"/>				
Asian restaurant.	<input type="checkbox"/>				
Chinese restaurant.	<input type="checkbox"/>				
Fast food restaurant.	<input type="checkbox"/>				
Pizzeria.	<input type="checkbox"/>				
Sea food restaurant.	<input type="checkbox"/>				
Main bar.	<input type="checkbox"/>				
Beach bar.	<input type="checkbox"/>				
Pool bar.	<input type="checkbox"/>				
Wine bar.	<input type="checkbox"/>				
Santorini bar.	<input type="checkbox"/>				

Staff (Please rate the)

Their friendliness and courtesy.	<input type="checkbox"/>				
The ability to respond to your needs.	<input type="checkbox"/>				
The quality of service in concierge.	<input type="checkbox"/>				
The ability of the reception staff to answer your questions properly.	<input type="checkbox"/>				
The ability of staff to be helpful.	<input type="checkbox"/>				
The knowledge of staff in the restaurant.	<input type="checkbox"/>				
The knowledge of staff in the bar.	<input type="checkbox"/>				
Staff's training and cooperation with the customers.	<input type="checkbox"/>				

Problems

	Yes	No
Did you report any problems during your stay?	<input type="checkbox"/>	<input type="checkbox"/>
If so, were these problems solved?	<input type="checkbox"/>	<input type="checkbox"/>

Overall Impression and Satisfaction

	Yes	No
Is it your first time in this hotel?	<input type="checkbox"/>	<input type="checkbox"/>
Were you pleased that you decided to visit this hotel?	<input type="checkbox"/>	<input type="checkbox"/>
Would you choose this hotel again for a future holiday?	<input type="checkbox"/>	<input type="checkbox"/>
Would you suggest this hotel to your friends?	<input type="checkbox"/>	<input type="checkbox"/>
Visiting this hotel exceeded your expectations?	<input type="checkbox"/>	<input type="checkbox"/>

ABOUT YOU (Optional)

Surname _____

Name _____

e-Mail _____ Telephone _____

Age ____ Sex ____ Country _____

Arrival and Departure Date _____ Room No _____

Purpose of stay _____

Excellent Very Good Good Fair Poor

Please rate the ...					
Service you have received.	<input type="checkbox"/>				
Hotel appearance.	<input type="checkbox"/>				
Lobby and the reception.	<input type="checkbox"/>				
Condition of fitness facilities.	<input type="checkbox"/>				
Condition of spa facilities.	<input type="checkbox"/>				
Condition of pool facilities.	<input type="checkbox"/>				
Sports facilities.	<input type="checkbox"/>				
Quality of internet access.	<input type="checkbox"/>				
Variety of cable TV channels.	<input type="checkbox"/>				
Shuttle service.	<input type="checkbox"/>				
Hotel location.	<input type="checkbox"/>				
Overall experience.	<input type="checkbox"/>				

COMMENTS :

