

Grocery Store Survey Template

All questions are optional. Follow each question's directions.
Write your answers to the open questions in the space provided.

Think about your most recent visit to the named store in the past seven days. Every question is optional. You can answer even if you did not buy anything.

1. What was the main purpose of the visit?

- ☐ Main grocery shop
- ☐ A few top-up items
- ☐ One specific item
- ☐ Browsing without a planned purchase
- ☐ Another purpose

2. Did you find the items you intended to buy?

- ☐ All of them
- ☐ Most of them
- ☐ Some of them
- ☐ None of them
- ☐ I had no specific items in mind

3. How easy was it to find your way to the products you wanted?

- ☐ Very difficult
- ☐ Somewhat difficult
- ☐ Neither easy nor difficult
- ☐ Somewhat easy
- ☐ Very easy
- ☐ Not applicable

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4. Which checkout did you use?

- ☐ Staffed checkout
- ☐ Self-checkout
- ☐ Another checkout method
- ☐ I did not make a purchase

5. How easy was it to complete checkout?

- ☐ Very difficult
- ☐ Somewhat difficult
- ☐ Neither easy nor difficult
- ☐ Somewhat easy
- ☐ Very easy
- ☐ I did not use checkout

6. When you needed help, did you get it?

- ☐ Yes
- ☐ Partly
- ☐ No
- ☐ I did not need help

7. What one change would improve your next visit?
