



LGU Sta. Elena Customer Feedback Form
CUSTOMER FEEDBACK FORM
Human Resource Management Office

Please let us know how we have served you. This form may be used for compliment, suggestion and other complaint.

Name: _____
 Address: _____
 Tel. No.: _____ Date: _____
 Email: _____ Gender: _____

Services availed of (please check):

1. Appointment preparation
2. Job order contract preparation
3. Issuance of Service Record
4. Issuance of Certificate of Employment, Service Record and other type of certification.
5. Notice of Step Increment preparation.
6. Notice of Salary Adjustment preparation.
7. Response to inquiries and concerns on personnel matters.

Purpose of Transaction: _____
 Person/Unit/Office transacted with: _____

Part 1: Customer Satisfaction Ratings

For the following questions, this rating scale shall be used.

- 5 – Outstanding**
- 4 – Very Satisfactory**
- 3 – Satisfactory**
- 2 – Fair or Needs Improvement**
- 1 – Poor**

QUESTIONS	5	4	3	2	1
1. How would you rate your OVERALL SATISFACTION with regard to the quality of service delivery?					
2. How satisfied were you in terms of the response time to your transaction given by the office.					
3. How satisfied were you with the outcome of the service provided?					
4. How satisfied were you with the service provider's extensive information on / understanding of the service being provided?					
5. How satisfied were you with the service provider's competence of the skills in delivering service?					
6. How satisfied were you with the service provider's friendliness, courteousness/politeness, for treatment and willingness to do more than what is expected or going the extra mile?					

Part II: Customer Feedback

1. Please check if you are providing a compliment, suggestion or complaint
 ___ Compliment
 ___ Suggestion
 ___ Complaint
2. Facts or details about the incident:

3. Recommendation/Suggestion/Desired action from office:

(Use the reverse side for additional feedback or comment)

THANK YOU!



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