


User Department Feedback Form

Please provide requested information for analysis, better and consistent performance purposes.

User Department Name:	Employment Generation & Marketing Mission (RD)
Project Name:	
Project Manager/Co-Ordinator Name:	R.V.V. Praveen
Address for communication:	DWCRA Bhojan, Lower Tankbund
Phone:	7702339922
Email:	ms.cgm@gmail.com
Rating : Please provide your ratings on the scale of 1 to 5 Note: If any item has the rating of less than 4, please detail the reasons for such rating (This will be used as guidance for improvement)	
1. Poor 2. Unsatisfactory 3. Satisfactory 4. Good 5. Excellent NA: Not applicable	

#	Attribute	Rating (1-5,NA)	Remarks
1.	Service Delivery/ Project Delivery:		
	a) The Project/Service was delivered as per the schedule	4	
	b) The delivered service/project was as per the requirements/specifications	4	
	c) The overall quality and performance of the final project/service delivered	4	
2.	Team members Service:		
	a) Approachability	5	
	b) Responsiveness	5	
	c) Communication skills	5	
	d) Flexibility	4	
	e) The promptness of problem resolution	4	
3.	User experience/feel about application	Excellent/Good/Average/Bad	
4.	Overall rating	4	
5.	As service provider, CCG offers "Value for Money".	Yes/No	
6.	Would you use CCG's Services again?	Yes/No	

#	Attribute	Rating (1-5,NA)	Remarks
	Improvements Suggested		

Feedback given by	Name	R.V.V. Praveen	
	Designation	MIS Manager	
Signature		Date	27/8/24