



CUSTOMER SATISFACTION SURVEY FORM

 REFERENCE NUMBER

Kindly provide us with an honest evaluation of the services received from **ADMATEL** and its staff in order to serve you better in the future:

1. Name of Company: _____
2. Service Rendered: _____
3. How did you know ADMATEL?(optional)
 () Internet () Brochures () Referral () Events () Others, please specify _____
4. Please list other companies of your choice, in case you fail to avail of such services from ADMATEL (optional):

5. Please rate the performance of ADMATEL by checking the number that best expresses the following criteria:

	5	4	3	2	1
a. Quality of Result/s					
b. Timeliness of Result/s					
c. Staff (proficient, courteous, etc.)					

5 – Outstanding 4 – Very Satisfactory 3 – Satisfactory 2 – Fair 1 – Poor

6. Comments/ Suggestions on how to improve our services:

 Name/ Signature

 Date