Centre for Good Governance	2
User Department Feedback	_
Form	



CMN - 004 V3.0

W.E.F. 09/04/2020

User Department Feedback Form

Please provide requested information for statistical and trending purposes.

User Department Name:	I & PR Dept.,
Project Name	Classified modele
Project Manager\Co- Ordinator Name	V. Rajani
Address for communication:	the commissioner, ISPR Dept., Samachar Bhavan, A.C. Guards, Hyd-28
Phone:	040 - 23394038
Email	

Rating: Please provide your ratings on the scale of 1' to 5'

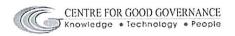
Note: If any item has the rating of less than 4, please detail the reasons for such rating (This will be used as guidance for improvement).

- 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		
	b) The delivered service\project was as per the requirements/specifications		
	c) The skills of the project team were as per expectations		
	d) The overall quality and performance of the final project/service delivered	P	
2.	Team members Service:		6 1
	a) Approachability	`	9000
	b) Responsiveness		
	c) Communication skills		
	d) Flexibility		
	e) The promptness of problem resolution	()	
3.	Overall rating		*
- 4	A significant of the control of the	Voc/N	I o
4.	As service provider, CGG offers "Value for Money".	Yes/N	10
5.	Would you use CGG's Services again?	Yes/No	

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W.E.F. 09/04/2020

Feedback	Name	D. Snimi Val				
given by						
	Designation	Journ	Direct	04		
Signature				Date	-	
1200	2				19-7-2022	

Joint Director
Information & Public Relations Dept.
Govt. of Telangana, Hyderabad.