

Centre for Good Governance	 CENTRE FOR GOOD GOVERNANCE Knowledge • Technology • People	CMN – 004 V4.2
User Department Feedback Form		W.E.F. 07/01/2022

User Department Feedback Form


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

User Department Name:	Telangana Backward Castes Co-Operative Finance Corporation Ltd,
Project Name	TG-OBMMS-BC Corporation
Project Manager\Co-Ordinator Name	RATHNA KUMAR D ASI
Address for communication:	6 th Floor, D.S.S. Bhavanam, Masab Tank, Hyderabad
Phone:	
Email	tsbccfc@yahoo.in
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:	Excellent	
	a) The Project/Service was delivered as per the schedule	Excellent	
	b) The delivered service\project was as per the requirements/specifications	Excellent	
	c) The overall quality and performance of the final project/service delivered	Excellent	
2.	Team members Service:	Excellent	
	a) Approachability	Excellent	
	b) Responsiveness	Excellent	
	c) Communication skills	Excellent	
	d) Flexibility	Excellent	
	e) The promptness of problem resolution	Excellent	
3.	User experience/feel about application	Excellent/Good/Average/Bad	
4.	Overall rating		
5.	As service provider, CGG offers "Value for Money".	Yes	
6.	Would you use CGG's Services again?	Yes	

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

Feedback given by	Name	Dr.Mallaiah Battu,		
	Designation	V.C. & Managing Director		
Signature	 MANAGING DIRECTOR TGCCFC LTD., HYDERABAD.	Date	16-07-2025	