

## Feedback Form

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### SECTION 1: PARTICULARS

Full Name :  Staff  Student/Parent

### SECTION 2: FEEDBACK TYPE

Stakeholder  Staff  Student/Parent  General Public  
 Nature of Feedback  Compliment  Feedback  Complaint  
 Area of Feedback  Academic  Facilities  Student Support  Others

### SECTION 3: FEEDBACK

Description of Feedback	Suggestions for Improvements

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Signature

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Date

**SECTION 4: FOR OFFICIAL USE ONLY**

Receipt of Feedback  
(Including acknowledgement)

**Received by** : \_\_\_\_\_

**Name** : \_\_\_\_\_ **Designation** : \_\_\_\_\_

**Date** : \_\_\_\_\_ **Signature** : \_\_\_\_\_

Follow-Up

**Action(s) taken** : \_\_\_\_\_

**Performed by** : \_\_\_\_\_ **Designation** : \_\_\_\_\_

**Date** : \_\_\_\_\_ **Signature** : \_\_\_\_\_

**SECTION 5: OUTCOME ACKNOWLEDGEMENT (IF APPLICABLE)**

**Outcome** :  Satisfied  Not Satisfied

**Date** : \_\_\_\_\_

**Remarks (If any)** : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name** : \_\_\_\_\_ **Signature** : \_\_\_\_\_