

FEED BACK FORM ABOUT WORKING OF DELHI GOVERNEMENT DEPARTMENTS

(To be filled up by citizens and dropped in the drop box kept in office)

HELP US TO HELP YOU BETTER

Your views and suggestions will be kept confidential

(A) Purpose of visit and your view about the standard of services.		
(i)	Name of the Department	
(ii)	Purpose of visit	
(iii)	(a) No of visits you had to pay to get the service. Please tick mark (√)	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> More than 4
	(b) Average time spent on each visit in minutes. Please tick mark (√)	<input type="checkbox"/> Up to 30 min <input type="checkbox"/> 30-40 min <input type="checkbox"/> 45-60 min <input type="checkbox"/> 60-90 min <input type="checkbox"/> Over 90 min
(iv)	Was the required Form available at the Counter?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(v)	Did the Counter Clerk explain the details of documents required to be filed with application	<input type="checkbox"/> Yes <input type="checkbox"/> No
(B) Availability of Officers & Staff in office		
(i)	Concerned Officer	<input type="checkbox"/> Yes <input type="checkbox"/> No
(ii)	Counter Staff/ Dealing hand	<input type="checkbox"/> Yes <input type="checkbox"/> No
(C) How do you rate the behaviour VeryGood <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> BelowAverage <input type="checkbox"/>		
(D) Environment, Hygiene and Sanitation		Satisfactory Unsatisfactory
(i)	Front office getup and general environment	<input type="checkbox"/> <input type="checkbox"/>
(ii)	Signage system/ Display of Notice Boards	<input type="checkbox"/> <input type="checkbox"/>
(iii)	Sitting arrangement	<input type="checkbox"/> <input type="checkbox"/>
(iv)	Availability of drinking water and glasses	<input type="checkbox"/> <input type="checkbox"/>
(v)	General cleanliness and hygiene	<input type="checkbox"/> <input type="checkbox"/>
(vi)	Proper ventilation	<input type="checkbox"/> <input type="checkbox"/>
(vii)	Availability of separate toilet facilities for Ladies and Gents	<input type="checkbox"/> <input type="checkbox"/>
(E) Tout Menance and Corrupt Practices		
(i)	Were you intercepted by middleman/tout?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(ii)	Did you avail of his services? If yes, reasons therefore	
	<input type="checkbox"/> Assured positive result <input type="checkbox"/> Avoid queue <input type="checkbox"/> Avoid frequent visits <input type="checkbox"/> To save time & energy <input type="checkbox"/> Lack of wateriness of processes and procedures	

(iii)	Did you come across any corrupt practices, if yes please give details:
(F) Satisfaction level	
<input type="checkbox"/> Excellent <input type="checkbox"/> Quite satisfactory <input type="checkbox"/> Average <input type="checkbox"/> Below Average	
(G) Suggestions/ Remarks (Please attach additional paper if required) Name and Address: (Optional) Tele No: (OPTIONAL)	