CUSTOMER VERBAL FEEDBACK FORM

Feedback Ref. No.	
Date/Time	
Customer's Name*	
Address*	
E-mail Address*	Telephone*
	*optional
Received by & Date	Signature
Feedback : Complaint Su	uggestion Compliment
For Corporate Communications Division / Unit Use	
Action (s) to be taken:	CCRF REF NO :

Note: This form should be filled by staff & completed when you receive any verbal feedback (maklumbalas lisan).

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Guidelines:-

When our valued customer (user) has something to complaint/comment,

suggest to him/her to fill in the Customer Feedback Form.

• If he/she hesitated or refused to fill any form, listen to what he/she has to

say. If he/she is willing to give name, contact number and/or address,

write it down so that the Management can get back to them on the

matter.

• Do not panic, stay calm and give an explanation (if you feel confident

about what you have to say) or suggest to him/her to see the Officer-on-

Duty.

• Tell them that their complaint/comment will be brought to the

Management's attention and we will look into rectifying/improving the

matter. Thank him/her.

And.....SMILE © (even if it is hard to do so when someone is upset). Don't

let one minute of bad situation spoil your whole day, it is not worth ruining

the remaining 1,439 minutes.

• Immediately complete this form and hand it over to the Corporate

Communications Division (Pustaka Negeri Sarawak, Kuching)/Corporate

Communications Unit (Pustaka Negeri Sarawak, Miri) or through the

Officer-on-Duty.

Thank you. You have done a GREAT job!

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