



FEEDBACK FORM

Thank you for choosing our voice and data solutions. In an effort to improve our services we would appreciate if you would take time to complete this feedback form.

Please tick on your preferred response.

1. For how long have you been using our product / service

- 0- 6 months
- + 1 year
- 6-12 months
- Other (specify).....

2. How often do you use our product / service?

- Daily
- Monthly
- Weekly
- Other (specify).....

3. How satisfied are you with our product / service?

- Very satisfied
- Neutral
- Very dissatisfied
- Satisfied
- Dissatisfied

4. What impressed you most about the product / service?

- Quality of product
- Reliability
- Price
- Customer services

5. What disappointed you most about the product / service?

- Quality of product
- Reliability
- Price
- Customer services

6. What do you like about the product / service?

- Quality
- Convenience
- Coverage
- Reliability

7. What do you dislike about the product / service?

- Quality
- Convenience
- Coverage
- Reliability

8. Compared to similar products offered by other companies, how do you consider our product?

- Much better
- About the same
- Much worse
- Somewhat better
- Somewhat worse

9. Would you use our product / service in the future?

- Definitely
- Not sure
- Definitely not.
- Probably
- Probably not

10. Would you recommend our product / service to other people?

- Definitely
- Not sure
- Definitely not.
- Probably
- Probably not

Other Comments.....

THANK YOU FOR YOUR FEEDBACK