



## Feedback Form

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

Thank you for taking the time to give us your feedback. As part of St. Francis' ongoing commitment towards excellence, we value your views and comments on our courses and services.

Please tick the appropriate box:

**Courses:**

<input type="checkbox"/>	ELF	<input type="checkbox"/>	London IGCSE	<input type="checkbox"/>	AUSMAT	<input type="checkbox"/>	Express Pre-University Program
<input type="checkbox"/>	Lower Secondary	<input type="checkbox"/>	GCE 'A' Level	<input type="checkbox"/>	HND (Business)	<input type="checkbox"/>	
<input type="checkbox"/>	GCE 'O' Level	<input type="checkbox"/>	London 'A' Level	<input type="checkbox"/>	SF Baccalaureate	<input type="checkbox"/>	

<b>Courses Offered:</b> (Please tick)	Excellent	Good	Average	Poor
Range available				
Price				
Innovation				
<b>Staff Service:</b> (Please tick)	Excellent	Good	Average	Poor
Knowledge of Courses				
Helpfulness				
Waiting Time				

Were you able to find the course you were looking for: ( ) yes ( ) no

If not, what were we not able to provide:

\_\_\_\_\_

Other than the above, what one suggestion would you make to help us improve our services - e.g. do you see anything on your visit that could be made better; any other course or service we don't currently offer that you think could be useful.

\_\_\_\_\_

Other comments:

\_\_\_\_\_

Don't think anyone reads these things? We do! Feel free to include your phone number or e-mail address if you'd like Cheryl (Customer Service -cherylwong@sfms.edu.sg) to respond to your comments personally.

Name: \_\_\_\_\_ Date of Visit: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Tel No: \_\_\_\_\_ (res) \_\_\_\_\_ (hp/pg) \_\_\_\_\_