CLIENT SATISFACTION FORM

Details of Applicant
Name of Company/Client:
Address:
Telephone number/Fax/e-mail:
Title of the project:
Contract No. of the Project:
Date of issue of Report/ testing:

The present document, is used by "EUCLIDIS S.A." for the assessment of client's satisfaction with purpose the continuing improvement of the quality of the provided services. You are kindly requested to fill in (✓) and return this document to the Body.

1. Satisfation for the provided services of the Company:

Items	**Rating of satisfaction of Client**				**Justification of answear (optional)**
	Dissatisfied	**Neutral**	**Satisfied**	**Very satisfied**	
Response/ Contant with Body					
Employee's behaviour					
Timely response to the assessment timeschedule					
Items	**Rating of satisfaction of Client**				**Justification of answear (optional)**
	Dissatisfied	**Neutral**	**Satisfied**	**Very satisfied**	
Technical skills and Abilities of the Body					
Quality of the assessment					

2. Proposals to improve our quality

Please write to us any proposal regarding the services provided by EUCLIDIS S.A. and where you believe that improvements are needed or any other proposal that could improve the quality of our services.

No.	Item	Client's Proposal
1		
2		
3		
4		

3. In case you do not wish to fill in the present document please tick (✓) in the corresponding box below.

I do not want to fillin the present document	

For the Client

(*Name/ Surname & Signature*)

Notes:

1. The present form can be sent by fax to number ……., or by e-mail to …… (The form is also available electronically)
2. Please keep the present form in your records in case of future cooperation with us.