

# Financial Services Customer Feedback Sheet

We value your trust and partnership. Please take a moment to provide your feedback regarding your recent experience with our financial advisory and planning services. Since this form is designed to be printed, please write your responses clearly in the spaces provided.

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## 1. Customer and Account Information

Customer Full Name:

Account or Portfolio Number (If applicable):

Email Address:

Phone Number:

Date of Service/Interaction:

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## 2. Financial Representative & Service Evaluation

Name of Financial Representative / Consultant:

Type of Service Received (e.g., Retirement Planning, Investment Consultation, Loan Application, Wealth Management):

Rate the representative's professionalism and knowledge (Scale of 1 to 5, where 5 is Excellent):

Rate the clarity of explanations regarding financial products and risks (Scale of 1 to 5, where 5 is Excellent):

Rate our responsiveness and speed of service delivery (Scale of 1 to 5, where 5 is Excellent):

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## 3. Detailed Feedback & Comments

What was the primary objective of your meeting or transaction today?

Did our services meet your financial planning expectations? (Please elaborate):

What specific areas can we improve in our advisory or transactional processes?

Any other comments, compliments, or concerns you would like to share:

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**Thank you for your valuable feedback.**

Please print this completed document and hand it to our branch staff, or mail it to our Quality Assurance Department at our corporate office address.

