

**Central Drugs Standard Control Organization
Directorate General of Health Services
Ministry of Health and Family Welfare
Government of India
FDA Bhavan, ITO, Kotla Road, New Delhi -110002**

FEEDBACK FORM (EXTERNAL)

Kindly provide the feedback to CDSCO (HQ) on the performance of relevant Divisions to improve the quality of services and send the same to feedback@cdsco.nic.in.

Name of Division:

I. Quality of Services

S. No.	Details	Excellent	Very Good	Good	Fair	Poor
		5	4	3	2	1
a)	Response to any queries related to CDSCO services, if requested					
b)	Processing of Files/cases					
c)	Maintenance of Timeline					
d)	Grievance Hearing/Redressal					
e)	Others (Specify)					

Note: Feedback related to services of CDSCO (HQ) will be accepted and evaluated as follows:

Total marks obtained X 100
Percentage of Customer satisfaction =-----
Maximum marks (20 or 25)

II. Your Suggestions for our improvement, if any:

Signature:

Name:

Designation:

Organisation:

Email ID:

Contact No.:

Date

F01(SYS-P-05)