



EMBASSY OF THE REPUBLIC OF THE PHILIPPINES
שגרירות רפובליקת הפיליפינים
TEL AVIV

Client Feedback Form

Please let us know how we have served you. Your comments and suggestions will help us serve you better. If you have a question or concern for which you would like a response, please contact the Consular Section through any of the following means:

Tel: 03-601-0500 Fax: 03-604-1038 Website: www.philippine-embassy.org.il

Name: (Optional)

Contact Details: (Optional)

Date:

1. What time did you arrive at the Consular Section?

2. What time did you finish your transaction?

3. What transaction did you have at the Consular Section?

Assistance to Nationals

Authentication

NBI Clearance

Overseas Voters Registration

Passport (New/Renewal/Lost/Release)

Report of Birth

Report of Marriage

Special Power of Attorney

Visa application and release

Others (please specify) _____

4. Please check on the appropriate box to rate our services.

	Excellent	Good	Satisfactory	Poor
1. The speed of the service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The accuracy of the information provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The courteousness/helpfulness of the staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The ease in understanding the consular forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Overall service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or suggestions to help us improve our level of service:

Please give this form to any of the staff of the Consular Section or drop in the boxes provided at the Consular Section or lobby.