# aNNEXURE A3: TESTIMONIAL TEMPLATE

**This document serves as reference referral and a service satisfaction survey rendered by:……………………………………………………….………………………………...**

**Section A:**

**REFERENCE COMPANY WHO RECEIVED THE SERVICE:**

Client Name: ………………………………………………………………………………………………………………….………...

Client contact person and phone number: …………………………………………………………………………………………………………………….…...……………………

Contract Period: …Start date: ………………………………………………End Date…………………………………..…….

Description of the services: ……………………………………………………………………………………………………..…..

**Section B:**

**Please tick only ONE option.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No:** | **Criteria** | **Good** | **Average** | **Poor** | **Comments** |
| 1. | Level of satisfaction |  |  |  |  |

**Comments:**

…………………………………………………………………………………………………………………….......................................

…………………………………………………………………………………………………………………….......................................

**Signature**:…………………………………………………….

**Date:** …………………………………………………………