Community Development Medicinal Unit

Feedback on CDMU website

Date:

1. Name of the Individual and Organization represented:

Full postal address:

Contact Telephone / Fax / E-mail:

2. What is your overall impression of the CDMU West Bengal website: Excellent Very good Good Average Poor

3. Your comments on the website [Attach additional sheet if necessary]

5. Suggestions regarding additional information to be incorporated: [Attach additional sheet if necessary]

Please fill-in this form and mail it to:
CDMU Documentation Centre, 47/1B Garcha Road, Kolkata – 700 019, India.

For CDMU office use only

Intimation to CDMU Website Manager: Yes No **Date intimated**: _____

Feedback report no.: _____ **Feedback report filed by**: _____

Signature with date