



Touchstone International Institute
躍龍門國際學院

FEEDBACK/SUGGESTION FORM

Part A: Particulars

| | | |
|--|-------------|-------|
| Name: | Contact No: | Date: |
| Nature of Feedback/Suggestion: | | |

* The information you have provided will be kept confidential and used solely for communicating with you.

Acknowledgement of Receipt

Signature

Signature

Ref: SVC-SFE-10-V1.0
