

# Customer Interaction Assessment Form

Assessor Name

Date

Customer Name

Interaction Type

Select

Reference/Call ID (optional)

Criteria	Score	Comments
Greeting / Introduction	<input type="button" value="▼"/>	<input type="text"/>
Understanding Customer Needs	<input type="button" value="▼"/>	<input type="text"/>
Solution Provided	<input type="button" value="▼"/>	<input type="text"/>
Communication Skills	<input type="button" value="▼"/>	<input type="text"/>
Professionalism	<input type="button" value="▼"/>	<input type="text"/>

Overall Comments

Action Items / Recommendations

