CE0004 (02)

**Design Request Form**

|  |  |
| --- | --- |
| **Service Requested by:** | |
| **Department:** | |
| **Contact Person:** | |
| **Contact Number:** | **Email:** |
| **Signature:** | |
| **Signature from Head of the Office/Department:** | |

1. **Event Materials Design**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of the Event:** | | | |
| **Date:** | | **Time & Venue:** | |
| **Required Items: (Please tick)** | | | |
| X Banner | Backdrop Banner | Outside Banner | Poster |
| Brochure | Flier | Certificate | Card |
| Other: | | | |
| Attachments (please tick): | Text  Photograph of speakers/guests  Speaker/guest information (full name, designation, affiliation)  Other (please specify): | | |

1. **Publication/Print Material Design**

|  |  |
| --- | --- |
| **Title of the Publication:** | |
| **Expected Page Numbers:** | **Expected Size:** |
| **Expected Delivery Date:** | |

1. **Branding Material Design**

|  |  |
| --- | --- |
| **Title of the Design:** | |
| **Expected Location:** | **Expected Size:** |
| **Expected Delivery Date:** | |

1. **Remarks/Other Instructions**

|  |
| --- |
|  |

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**Design Request Form (Feedback)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (Please rate: 5 - Excellent; 1 - Not good at all) | **5** | **4** | **3** | **2** | **1** |
| Have you received the designs on time? |  |  |  |  |  |
| Have you received the print materials on time? |  |  |  |  |  |
| Rate the design all over |  |  |  |  |  |
| Rate the content distribution in the design |  |  |  |  |  |
| Rate the social media engagement of the content |  |  |  |  |  |
| Overall experience |  |  |  |  |  |

|  |
| --- |
| Do you have any suggestions that will help us enhance the way we provide services? |

Feedback completed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: Manager

Communications Office