

MODIFIED FORM A – DEPARTMENT/AGENCY PROCESS RESULTS REPORT

AGENCY NAME: _____

	(A)	(B)		
	ONE (1) EXTERNAL CORE SERVICE	ONE (1) INTERNAL SERVICE		
(1) Name of Service				
(1a) Reason for Selection				
(2) Responsible Unit/s				
(3) Identified Clients <i>(per service)</i>				
(4) Number of Client Visits in FY 2023				
(5) Volume of Transactions in FY 2023				
(6) Volume of Transactions in FY 2022				
(7) FY 2022 Improvements <i>(ease of transaction, digitization, standardization)</i>				
(8) FY 2022 Results <i>(evidence)</i>				
(9) FY 2023 Improvements <i>(ease of transaction, digitization, standardization)</i>				
(10) FY 2023 Results <i>(evidence)</i>				
(11) FY 2023 Citizen/Client Satisfaction Rating of the Service (per service rating)				
(12) Remarks				

Prepared by:

Name of Officer / Designation / Date

Approved by:

Department Secretary/Agency Head/ Date